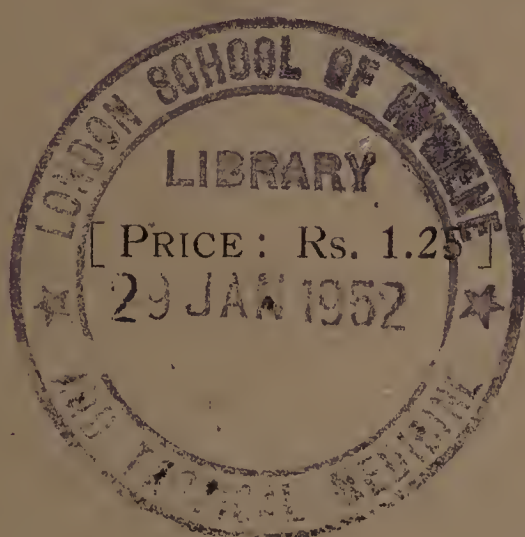




COLONY OF MAURITIUS

Annual Report
ON THE
Medical and Health Department
1950



PRINTED AND PUBLISHED BY
J. ELIEL FELIX, GOVERNMENT PRINTER,
PORT LOUIS, MAURITIUS
DECEMBER 1951

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ANNUAL REPORT ON THE MEDICAL AND
HEALTH DEPARTMENT 1950

Corrigendum

In page 28, 1st column of TOTAL, please read 124,701
instead of 124,571.



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CORRIGENDUM

Page 4, 3rd line of para. 3, *please read* "work" *instead of* "works"

„ 34, 7th do. 29 (a) *please read* "Nurses" *instead of* "They"

„ 51, 5th line of 2nd para. *after* "80 per cent of" *please insert* "parents of"

„ 55, penultimate line of para. 67 (a) *please read* "for" *instead of* "of"

„ 84, 3rd line of para. 105, *please insert* "an" between "buy" and "adequate."

Annal Report on the Medical and Health Department 1950

Foreword

The year 1950 has been the healthiest on record in Mauritius. The death rate has been lower than ever before: 13.9 per 1,000.

The infantile mortality has reached a new low level of 76.3 per 1,000 and it is with a sense of satisfaction that we record for the second year running an infant mortality rate with a two-figure number. The birth rate which was already high, has increased still further to 49.7 per 1,000. The health figures enumerated in 1949 were records of achievement; not only have these been maintained in 1950, but they have been surpassed in many directions in spite of continuing staff shortages.

The principal factors in bringing about these very appreciable results have been the relative prosperity of the past few years and, above all, the striking success of the antimalarial measures carried out since the end of the war. Malaria, which until a few years ago caused the deaths of from 5 to 6 per 1,000 of the population each year, now accounts for less than one per 1,000, while admissions to hospital on account of the disease which used to average over 3,000 per annum amounted to less than 300. By eliminating to so large an extent the debilitating effects of chronic malaria, this achievement has increased the ability of the population to resist other infections and there has consequently been a simultaneous reduction in the number of deaths due to infective and parasitic diseases.

The year 1950 was, on the whole, favourable in regard to the incidence of infectious disease. While the incidence of enteric fever remained at nearly the same level as in the two previous years, the number of cases of diphtheria notified amounted to 96 as contrasted with 154 for 1949 and 163 for 1948. No cases of major infectious diseases namely: plague, cholera, yellow fever, small-pox and typhus occurred during the year under review.

There has been no slackening in the demand for medical services from all sections of the community, for indeed the people of this colony are fast becoming health-conscious and they are no longer prepared to suffer illness or confront ill-health with that passivity which until a few years ago appeared firmly established by its long continuance. The Education Department, the Press, the cinema and the wireless, have played an important part in this respect and there is no doubt that the new drugs have also conduced to the change of attitude. The Press has always shown extreme willingness to publish information on health matters and on measures taken for the prevention of disease. Visual education of the people by means of the mobile cinema has been continued uninterruptedly. The contribution of the Mauritius Broadcasting Service in respect of our health talks has been very generous.

Amongst the developments of special interest are the successful results with the treatment of enteric fever with chloramphenicol, the inception of a Survey of Blind Persons and of all persons suffering from an eye defect which may ultimately lead to blindness, and the extension of the antenatal service. In rural areas, the cleansing services continued to expand under the auspices of local village councils, and the activities of their members were very praiseworthy.

As in former years, the most cordial cooperation existed between all Government Services and this Department. Our relations with the Senior Medical Officer, Military Hospital, have been most harmonious. The three Civil Commissioners, who are responsible for district administration, have spared no efforts to assist us in our difficult task. To one and all I wish to express my thanks and those of the Department's staff for their much appreciated support and help.

Relations with the Municipal Council of Port Louis and the Boards of Commissioners for the township areas of Curepipe, Quatre Bornes and Beau Bassin—Rose Hill were cordial. Likewise, cooperation with various voluntary societies and the ladies and gentlemen who have so willingly given their time for the numerous committees connected with the Department has been an encouraging feature during the year. The unselfish service of the voluntary worker is of the greatest importance and as the medical services of Mauritius expand, more and more assistance of all kinds will be required from the public-spirited.

Doctor E. E. Pridie, C.M.G., O.B.E., D.S.O., Chief Medical Officer in the Colonial Office, toured the colony in January. In the observations and recommendations which he made before leaving the Colony, he expressed the view that the Mauritius Medical Services afford accessible treatment facilities for the whole population in all parts of the Island by means of its network of hospitals and dispensaries. He considered that the Civil, Victoria, Orthopaedic and Mental Hospitals are well run and efficient and that the campaigns which have been carried out in recent years by the Health Staff against malaria have already produced striking results and that these, combined with the recently formed Malaria Eradication Service, should at least reduce the incidence of malaria to negligible proportions.

Functions

1. The functions of the Health Department are:—

- (a) to investigate the influence of social, environmental and domestic factors on the incidence of human disease and disability ;
- (b) to plan and carry out measures for the promotion of health ;
- (c) to institute and maintain measures for the prevention of disease ;
- (d) to provide a quarantine service to prevent the introduction of infectious disease by sea or air ;
- (e) to provide facilities for treatment of disease, including mental disease, by maintenance of hospital and dispensary services ;
- (f) to make provision for the rehabilitation of the disabled ;
- (g) to control the practice of medicine, dentistry and pharmacy ;

- (i) to provide facilities for the training of nurses, midwives and sanitary officers ;
 - (j) to advise local authorities regarding their health services and to inspect those services ;
 - (k) to prepare and publish reports and statistical or other information relating to health.
-

PART I

Administration

STAFF

2. The staff of the Medical and Health Department is composed of:—

The Director of Medical Services.

Two Deputy Directors of Medical Services (one new post).

Three Medical Superintendents of hospitals.

Four specialists (Surgery, Radiology, Orthopaedic surgery, Leprosy and skin diseases), new posts, two of which are vacant.

One Senior Pathologist and one Pathologist.

Twenty eight (28) Medical Officers including two Medical Officers of Health (one post vacant), one Medical Officer of Health Port Louis and Port Health Officer (vacant), two School Medical Officers (vacant) and one Woman Medical Officer (vacant) post transferred from the Development and Welfare Estimates as from 1st July, 1950.

Two Dentists (one post vacant).

One Rehabilitation Officer, one Sister in charge of Orthopaedic Unit, two Physiotherapists (one post vacant) and two occupational therapists. (All these posts transferred from the Development and Welfare Estimates as from 1st July, 1950).

One Government Chemist (vacant), one Assistant Government Chemist and twelve (12) laboratory assistants including one new post of Laboratory Assistant Bio-Chemistry.

One entomologist, one microscopist, one chief fieldman, six fieldmen (four posts vacant).

One pharmacist (new post).

One visiting Matron (new post), three matrons and one assistant matron (Mental Hospital).

One superintendent of midwives (post transferred from Development and Welfare Estimates on 1st July, 1950).

One assistant superintendent for Maternity and Child Welfare (new post) and forty eight (48) midwives (forty three new posts including personnel transferred from the Maternity and Child Welfare Society).

One Nutrition Officer (post vacant), one assistant Nutrition Officer and five village health workers (all posts transferred from the Development and Welfare Estimates on 1st July, 1950).

One chief clerk, one stock verifier, one storekeeper, one assistant storekeeper and thirty clerks of the General Clerical Service and allied branches.

One head attendant, one assistant head attendant, one steward and clerk, one storekeeper (Mental hospital); ten stewards, 173 dressers of various grades and ten male attendants, six senior nursing sisters, two sister tutors for Nurses' training schools (posts transferred from Development and Welfare Estimates on 1st July, 1950.) Ten charge nurses, twenty-seven ward sisters, and eighty-nine nurses, eight sisters of mercy, four officers in charge of linenrooms and one seamstress.

Three senior sanitary inspectors (new posts) and fifty-five sanitary inspectors of various grades; one steward Quarantine Station and ten other officers of the Sanitation Branch including one transport officer and storekeeper sanitation.

One hundred and thirty four other officers of minor ranks (messengers, drivers, etc.).

The personnel under "Other Charges" consists of:—

One Ophthalmologist working part time at Civil and Victoria hospitals.

One secretary X-ray Department, five nurses, two midwives and one dresser.

333 male servants and 221 female hospital servants, 129 labourers, 27 drivers, 16 carpenters, 2 timekeepers, 3 overseers, 1 supervisor, 7 mechanics, 1 boatman, 2 stokers, 1 deckhand, 1 electrician and 9 ratcatchers, 4 washermen, 3 seamstresses.

STAFF MOVEMENTS

3. One Deputy Director returned from overseas leave on the 3rd May and acted also as M.O.H. Port Louis and Port health officer; he left the colony on official mission to the United Kingdom on 28th September and returned on the 27th October.

One new post of Deputy Director was filled on the 1st July.

The substantive holders of the following posts who proceeded on overseas leave in 1949 remained on leave throughout the year:—

One medical superintendent (Civil Hospital) and four Medical Officers, two of whom were following courses for the Diploma in Anaesthesia and the Diploma in Medical Radiology and Therapy respectively.

During their absence, temporary medical officers continued to act in their place. The previous holder of the post of Medical Superintendent (Victoria Hospital), who was on leave in the Colony previous to retirement, retired from the service on the 2nd May.

The Pathologist arrived in the Colony on appointment on the 13th November.

Four Medical Officers left the colony on overseas leave: one in February, one in May and two in June.

One of them returned from leave in December.

One Medical Officer arrived in the Colony on 1st appointment on the 9th October and three temporary Medical Officers were appointed Medical Officers.

One dentist left the colony on overseas leave in May and the dental clinic was closed during his absence.

The Physiotherapist who was acting as Rehabilitation Officer was appointed to the vacant post on the 10th May.

The Sister in charge of Orthopaedic Unit left the Colony in May on leave on the expiration of her contract.

One Physiotherapist arrived in the Colony on appointment on the 24th July.

The Government Chemist resigned his appointment on the 18th August and the post remained vacant.

On the expiration of the leave prior to retirement of the Assistant Government Chemist, the acting Officer was definitely appointed to the post and further acted as Government Chemist from the 18th August.

The Matron Civil Hospital left the Colony on overseas leave in January. She was appointed Visiting Matron and returned from leave in November. The officer who was acting as Matron, Civil Hospital, was appointed to the post.

The Superintendent of Midwives left the Colony on leave in September on the expiration of her contract. No acting appointment was made.

The Assistant Nutrition Officer continued to supervise the work of the Nutrition Division under a Medical Officer of Health.

The Stock Verifier was promoted Chief Clerk on the 1st July, in the place of the previous holder transferred on promotion to the Public Assistance Department.

The Senior Clerk Statistics and one Sanitary Inspector left the Colony on overseas leave, in December and November respectively.

FINANCIAL

4. The revenue of the Colonial Government for the financial year 1949-50 was Rs. 55,100,214.48 of which Rs. 170,840.54 was received through the Medical and Health Department. The actual expenditure on Medical Services was Rs. 3,948,428.80 or Rs. 8.69 per cent of the total expenditure for the year, which amounted to Rs. 45,446,710.17. This represents a sum of Rs. 8.64 per head of the estimated population at 31st December, 1949 (mid-financial year).

Under the Development and Welfare Plan the revenue was Rs. 715,895.36 and the expenditure Rs. 785,164.26.

The following analysis of the general estimates indicates the distribution of the allocation:—

MEDICAL AND HEALTH DEPARTMENT ESTIMATES 1949-50

	<i>Adminis- tration</i>	<i>%</i>	<i>Medical Services</i>	<i>%</i>	<i>Health</i>	<i>%</i>	<i>Total</i>
Personal Emoluments	110,526	8.7	955,215	75.1	206,435	16.2	1,272,176
Other Charges:—							
Recurrent ...	54,200	1.7	1,928,960	65.1	1,020,620	33.2	3,130,380
Non-Recurrent ...	—	—	110,600		19,000		
TOTALS ...	164,726	3.7	2,991,775	68	1,246,055	28.3	4,402,556

These figures represent a total expenditure of Rs. 8.64 per head of population estimated at the middle of the financial year distributed as follows:—

Cost of Administrative Services per head ...	0 32
Cost of Medical Services per head ...	5 87
Cost of Health Services per head ...	2 45
	—
TOTAL ...	8 64
	—

The principal increases in recurrent expenditure were due mainly to:—

- (a) increase in the number of patients admitted to hospitals ;
- (b) increase in the prices of provisions and drugs ; and
- (c) purchase of an additional supply of Chloramphenicol as a precautionary measure.

The non-recurrent items provided for additional equipment for the hospitals and the X-Ray Department.

In addition to the above, account must be taken of the amounts expended on Public Health Work by Local Authorities and also by sugar estate owners for their hospitals. An indication of the extent of the Health Services on sugar estates is the fact that they have a total hospital accommodation of 738 beds.

LEGAL

5. The following legislation was passed:—

Ordinance No. 48. Cited as the Public Health (Amendment) Ordinance 1950 to amend subsection (1) of section 153 of the Public Health Ordinance 1925 to the effect that the words “ including mobile stalls ” shall be inserted after the word “ stalls ” in the Principal Ordinance.

Ordinance No. 50. Cited as the Public Health (Amendment No. 2) Ordinance 1950. To fix charges to be paid by Government Officers, servants and employees for admission into public hospitals and to provide for delivery of medicines free of charge to certain persons.

Ordinance No. 55. Cited as the Dangerous Drugs Ordinance, 1950. To regulate the importation, exportation, manufacture, sale and use of opium and other dangerous drugs, and to consolidate the laws heretofore enacted to enforce control over dangerous drugs in general.

Government Notice No. 17. Being regulations made by the Director of Medical Services under item (a) of paragraph (1) of Part VI of Section 193 of the Public Health Ordinance 1925, fixing the charges for night soil service performed on private premises in the town of Curepipe and in the village of Phoenix.

Government Notice No. 21. Cited as the Cemeteries (Amendment) Regulations 1950, being regulations made by the Director of Medical Services under Section 193 of the Public Health Ordinance 1925, to revoke Regulation 19 of the principal regulations to the effect that no cemetery once closed by order of the Governor in Council shall be used for any purpose other than the planting of trees except with the approval of the Governor in Council on the recommendation of the Director of Medical Services.

Government Notice No. 42. Cited as the Midwives Regulations 1950, being regulations made by the Midwives Board under Section 11 of the Midwives Ordinance 1926 as subsequently amended.

Government Notice No. 127. (Reprinted under Government Notice No. 138) Order made by the Governor under Section 36 of the Pharmacy Ordinance, 1912, and cited as the Pharmacy (Addition to List of Poisons) Order, 1950, to add to Schedule A to Government Notice No. 33 of 1940, as subsequently amended, the following substances:—

Alphaprodine, Amidone, Betaprodine, Hydroxypethidine, Isoamidone, Ketobemidone, Methadol, Methadyl acetate and Phenadoxone; Amidone and its salts, etc., as defined in Government Notice No. 130 of 1948, being deleted therefrom.

Government Notice No. 166. Being Regulations made by the Director of Medical Services under Section 193 of the Public Health Ordinance 1925 to revoke and replace Regulation 1 of the regulations published under Government Notice No. 22 of 1939 as subsequently amended, respecting the sale by auction or tender of the right to occupy stalls or shops or benches in any public market outside Townships.

Proclamation No. 7. Under Section 4 of the Public Health (Amendment) Order No. 24 of 1932, to order the closing of St. Julien and Centre de Flacq private abattoirs as from the 18th September 1950.

Proclamation No. 15. To extend the application of Part IV of the Dangerous Drugs Ordinance 1934 to the following substances:—

Alphaprodine, Amidone, Betaprodine, Hydroxypethidine, Isoamidone, Ketobemidone, Methadol, Methadyl Acetate and Phenadoxone; the Dangerous Drugs (Application) Proclamation 1948 being amended by the deletion of Amidone.

Government Notice No. 847. Under Section 161 of the Public Health Ordinance 1925 to appoint a portion of land at Cassis in the District of Port Louis to be the site of and to be used as a cemetery.

Government Notice No. 866. Under Section 161 of the Public Health Ordinance 1925 to appoint a portion of land at Beau Champ in the District of Flacq to be the site of and to be used as a cemetery.

General Notice No. 867. Under Section 161 of the Public Health Ordinance 1925, to appoint a portion of land at Choisy in the District of Flacq to be the site of and to be used as a cemetery.

General Notice No. 924. Under Section 161 of the Public Health Ordinance 1925, to appoint a portion of land at Rivière des Galets in the District of Savane to be used as a cemetery.

PART II

Natural and Social Conditions*

6. *Physiography.* The island of Mauritius lies between latitude $19^{\circ}50'$ and $20^{\circ}31'$ South and longitude $57^{\circ}18'$ and $57^{\circ}48'$ East of Greenwich. The total length North to South is nearly 39 miles and its breadth East to West is 29 miles. The area of the main island is 716 square miles and that of the small islets round the coast 4 square miles, making a total of 720 square miles (460,800 acres). The ground rises to an elongated central plateau, lying roughly North-South, the altitude of which above sea level is 1800–1900 feet. It is bounded on the North, East and South-West by abrupt and broken mountain ridges. On the South and South-East it slopes gradually to the sea. The highest mountain peak is 2,711 feet.

The coast line is irregular and is surrounded by numerous coral reefs. There are two ports and several anchorages of minor importance; the two ports are Port Louis on the North-West and Mahebourg on the South-East. Numerous sea-side resorts and bathing stations exist all round the coast.

Rivers and streams are numerous. They generally flow through large ravines and frequently their course is broken by waterfalls and rapids. None of the rivers are navigable and the regime of most of them is very variable: in dry weather they are little more than streams, while during heavy rains they swell to raging torrents.

7. *Climate.* Although Mauritius lies just within the tropics, its climate is on the whole comparatively mild and equable. There are, however, very sensible variations of climate in the different parts of the island.

From South to East the island is exposed to the normal trade wind currents. The North and Western Districts, the leeward side of the island, are consequently the driest and hottest.

* I am indebted to Mr. Marc Herchenroder, Director of Statistics, for some of the information contained in this part of the Report.

The maximum shade temperature recorded on the Northern plains (180 feet above sea-level) has never exceeded 95° F (35° C) and over the Central table-land (1,800 feet) the maximum seldom reaches 80° F (27° C). The high relative humidity however renders the heat oppressive at certain times of the year and causes considerable discomfort specially in the lowlands. For the same reason, the winter in the highlands is disagreeably cold, although the temperature never falls below 45° F (7° C). The humid conditions along the coast are favourable for the breeding of *A-Gambiae* and *A-Funestus*, the carriers of malaria in Mauritius. On the other hand, the sudden drops of temperature which are noticeable over the Central Plateau stimulate metabolism, and the diurnal and seasonal ranges of temperature which are met at that level render this plateau climatically better suited to the young and healthy than the narrower ranges encountered at the coast. Cases of heat-stroke which occur at continental stations in similar latitudes are almost unknown in Mauritius, but Europeans probably could not, except under very trying conditions, perform the manual field work required for agricultural purposes.

Rainfall is abundant but varies considerably in different parts of the island. The mean annual rainfall varies from less than 30 inches (760 millimetres) on the North and West coast to 150 inches (3·8 metres) in parts of the Central Plateau, where in some years it has been known to exceed 197 inches or 5 metres. The heavy summer rainfall begins in December, reaches a maximum between January and March and gradually decreases to the dry season in October and November. On the highlands, however, the winter rainfall, brought in by the trade winds, may be quite important. Tropical cyclones are frequent in the vicinity of Mauritius during the summer months (December to April) ; they have at times caused considerable damage to crops, trees and structures and even on rare occasions, caused loss of life.

8. *Social and Economic Conditions.* Although in relation to its resources, Mauritius is certainly considerably overpopulated, yet the density of population in the island is not overwhelmingly large, save perhaps in towns and villages where it easily matches some of the most densely populated regions of the globe. Port Louis shelters some 32,000 persons per square mile, Mahebourg 13,000, Curepipe 8,000. In the larger villages, cluster some 6,000 inhabitants per square mile. Hence on the point of population density, Port Louis might easily compare with the Chinese province of Macao, while the larger villages would compare favourably with Hong Kong and Singapore. The present population is three times what it was a century ago.

The Mauritan population lives in the greatest measure on the proceeds of sales of its sugar. The island has been fortunate in having produced, in the absence of destructive storms, increasingly record sugar crops during the last five years, the production being now 56 per cent above its pre-war level. The whole island economy is however dependent on this single crop, which constitutes 97 per cent of the domestic exports in value. The Colony produces comparatively little food: maize, insignificant quantities of rice, some potatoes and other root crops, vegetables and fruits. The bulk of the food is accordingly imported from the East and Far East and from Australia.

The relative prosperity of the past few years has enabled certain improvements in public services and additional social welfare measures to be undertaken. The incidence of malaria has been reduced to a very appreciable extent ; new projects concerning domestic water and electricity supplies and irrigation have been implemented ; new hospital wards have been constructed and the existing ones improved.

While this relative prosperity and the remarkable results achieved by antimalarial measures have brought the death rates to a low level, there has been a larger increase in the reproductive rates of the population. Birth rates have reached the highest figure ever recorded and the natural growth of the population is now $6\frac{1}{4}$ times what it was in pre-war days. This exorbitant natural growth constitutes one of the problems of the hour.

PART III

Laboratory Services

These consisted of the Central Laboratory at Réduit which is divided into two sections: Bacteriological and Chemical and two branch laboratories at Civil and Victoria Hospitals, which have been established in accordance with the policy of decentralising.

The total number of examinations made at the Central Laboratory and the branch laboratories continued to show an increase: 50,234 in 1950 ; 43,498 in 1949 and 41,396 in 1948 ; and it has fortunately been possible to provide relief to the Staff by the appointment of three junior Laboratory Assistants in December.

The report of the Senior Pathologist is appended. (Appendix I).

PART IV

Medical Services

(i) HOSPITALS

10. There are eight general hospitals in the Colony not including the special institutions for the treatment of orthopaedic cases, mental diseases and leprosy. The hospitals range from the larger buildings at Port Louis and Quatre Bornes to the smaller types of district hospitals. 28,303 in-patients were treated in the hospitals during the year as compared with 27,772 for 1949.

Table I shows the work performed at the various hospitals.

TABLE I

REPORT ON HOSPITALS (CALENDAR YEAR 1950)

MEDICAL AND HEALTH DEPARTMENT														
Hospital	Patients remaining on 31.12.49	Admissions	Deaths	Patients remaining on 31.12.50	Number of beds	Number of patients on any date during period under review			Medical cases	Surgical cases	Number of operations performed on			
						Maximum	Minimum				in-patients	out-patients		
Civil	...	...	...	244	7,795	469	241	376	385	201	5,670	2,125	1,672	2,380
Long Mountain	...	...	...	24	1,719	24	27	65	70	24	1,324	395	76	249
Poudre d'Or	...	...	...	23	1,892	26	15	70	65	15	1,299	593	167	230
Flacq	...	...	...	19	2,237	45	28	85	86	18	1,312	925	217	188
Mahebourg	...	...	...	29	2,156	99	34	106	90	29	1,495	661	179	652
Souillac	...	...	...	30	2,953	52	37	103	109	37	1,751	1,202	308	16
Moka	...	...	...	31	1,803	75	21	83	76	21	1,063	740	740	592
Victoria	...	...	...	196	6,570	304	194	272	263	166	3,832	2,738	1,849	3,511
Mental (Infirmary only)*	...	...	...	16	318	28	5	64	29	13	298	20	105	—
Industrial School	...	...	...	7	203	—	6	16	14	2	70	133	9	—
Beau Bassin Prisons	...	...	...	25	433	1	12	57	32	12	325	108	21	—
Floréal†	...	...	...	159	220	7	161	200	193	159	84	136	600	857
Leper	...	...	...	46	4	1	48	54	49	46	4	—	62	—
TOTALS	...	...	...	849	28,303	1,131	829	1,551	1,461	743	18,527	9,776	6,005	8,675

* Figures shown are for physical cases only. The Mental Hospital has a total bed strength of 653.

† Hospital for poliomyelitis and orthopaedic cases.

Buildings

11. The extensions to Mental Hospital continue and a new male ward will be opened in 1951. Detailed drawings for the proposed Orthopaedic and Rehabilitation Centre are now in preparation, as also are those for the Nurses' Home at Civil Hospital, Port Louis. A site for the Orthopaedic Centre has been acquired, but difficulties are being encountered for the purchase of a suitable plot of land for the Port Louis Nurses' Home.

The year 1950 saw continued progress in reconditioning the buildings and wards. Repairs and redecoration proceeded satisfactorily in Victoria Hospital throughout the period under review, and there is every hope that the work will be finished by the end of 1951. The work of the rehabilitation of the Civil Hospital was completed in 1948. All the wards in the two large hospitals (Civil and Victoria) are now provided with water supply, wash-hand basins and sinks. Redecoration was also carried out and a few alterations and additions of a minor nature were effected at the Moka district hospital.

Equipment

12. Provision of modern equipment is still proceeding and the quality of the hospital services is thus being improved year after year. The replacement of old beds by bedsteads of modern design, and of the old-fashioned locally made mattresses by comfortable and hygienic latex foam mattresses continued during 1950. More electric sterilizers and water heaters were provided.

Personnel

13. The increase in the number of patients coming up for examination and applying for admission into the hospitals has thrown a heavy burden on the medical staff of the Department. The medical establishment was increased during the year by three Medical Officers. Although these new appointments gave some relief, the advantage was counterbalanced by the fact that there were four medical officers on vacation leave in Europe, of whom one was taking the course for the Diploma in Anaesthetics and another for that of Radiotherapy.

It is disappointing to record the difficulty in recruiting Medical and Nursing Staff. It is practically impossible to get Medical Officers from overseas, and the supply of Mauritian Medical Officers who started their studies in European Universities after the cessation of hostilities in 1945 has just begun and it will be some time yet before it can have an appreciable effect on the local situation.

On the other hand the improvements in the conditions under which the nursing staff works and which were described in the previous year's annual report have had a favourable effect on attracting candidates to the Medical Service. During 1950, 26 new nurses and dressers were appointed, but the Department needs many more.

Radiological Work

14. The use of a modern diagnostic plant as from the beginning of the year greatly improved the quality of the work performed at the Department of Radiology and made it possible to meet the increased demand from the medical profession for X-Ray examination. The number of examinations

amounted to 8,780 as compared with 8,379 in 1949 and 5,775 in 1948. Although the figure indicating the examinations carried out shows an increase of only 401 over the previous year, the number of skiagrams quadrupled in comparison with 1949.

Table II details the number of examinations in 1950.

TABLE II

X—RAY EXAMINATIONS IN 1950

Upper limb	...	...	...	1837
Lower limb	...	...	...	1535
Ribs, Sternum	...	...	...	106
Spine	...	...	...	431
Skull	...	...	...	223
Lungs	...	...	...	2,745
Heart	...	...	...	35
Gastro-Intestinal tract	...	...	...	1,552
Gall Bladder	...	...	...	113
Urinary tract	...	...	...	173
Others	...	...	...	30
TOTAL				8,780

An order for more radiological equipment, including an additional diagnostic plant, a deep X-Ray therapy and a superficial therapy units was placed at the end of the year. This equipment is intended for the special X-Ray Department which will be constructed near the proposed Orthopaedic Centre referred to earlier in this report.

A supply of radium amounting to 98 milligrammes is available in the Colony.

Surgery

15. In spite of difficulties of staff, surgical practice has progressed and kept pace with recent advances ; and improvements in technique which experience has shown to be applicable to local conditions have been adopted.

Table III indicates the surgical work performed in all public hospitals of the Colony.

TABLE III

<i>Nature of Operations</i>								<i>Number Performed</i>
(1) STOMACH AND DUODENUM :—								
(a) Closure of perforation	...	...	...	...	...	...	...	30
(b) Gastro-enterostomy	...	...	...	...	...	...	...	74
(c) Gastrectomy	...	...	...	...	...	...	...	49
(d) Others	...	...	...	...	...	...	...	7
(2) INTESTINES :—								
(a) Closure of wounds and perforations	...	...	...	...	...	...	...	14
(b) Resection and or anastomosis	...	...	...	...	...	...	...	6
(c) Reduction of volvulus	...	...	...	...	...	...	...	5
(d) Reduction of intussusception	...	...	...	...	...	...	...	9
(e) Division of adhesions or bands	...	...	...	...	...	...	...	6
(f) For any other cause of obstruction	...	...	...	...	...	...	...	3
(g) Formation or closure of artificial anus	...	...	...	...	...	...	...	4
(h) Appendicectomy	...	...	...	...	...	...	...	296
(i) Drainage of peritoneal abscesses	...	...	...	...	...	...	...	5
(j) Omentopexy	...	...	...	...	...	...	...	1
(k) Exploratory laparotomy	...	...	...	...	...	...	...	40
(l) Others	...	...	...	...	...	...	...	5
(3) RECTUM AND ANUS :—								
(a) Excision of rectum	...	...	...	...	...	...	...	9
(b) Treatment of prolapse	...	...	...	...	...	...	...	36
(c) For fissure and fistula	...	...	...	...	...	...	...	49
(d) For ischio-rectal abscess	...	...	...	...	...	...	...	39
(e) Ligature of haemorrhoids	...	...	...	...	...	...	...	135
(f) Injection of haemorrhoids	...	...	...	...	...	...	...	11
(g) Sigmoidoscopy	...	...	...	...	...	...	...	0
(h) Others	...	...	...	...	...	...	...	61
(4) HERNIA :—								
(a) Inguinal	...	...	...	...	...	...	...	146
(b) Femoral	...	...	...	...	...	...	...	4
(c) Umbilical	...	...	...	...	...	...	...	1
(d) Others	...	...	...	...	...	...	...	19
(5) LIVER, SPLEEN AND PANCREAS :—								
(a) Upon liver	...	...	...	...	...	...	...	3
(b) Cholecystectomy	...	...	...	...	...	...	...	13
(c) Other operations upon gall bladder	...	...	...	...	...	...	...	7
(d) Splenectomy	...	...	...	...	...	...	...	5
(e) For pancreatitis	...	...	...	...	...	...	...	0
(f) Others	...	...	...	...	...	...	...	1

TABLE III—*continued*

<i>Nature of Operations</i>								<i>Number Performed</i>
(6) URINARY SYSTEM :—								
(a)	Nephrotomy	...	...	...	...	...	...	2
(b)	Nephrectomy	...	...	...	...	...	...	5
(c)	Perinephric explorations	...	...	...	...	...	...	1
(d)	Upon ureters	...	...	...	...	...	...	7
(e)	Cystotomy and supra pubic drainage	...	...	...	...	...	...	23
(f)	Prostatectomy	...	.	...	...	...	...	11
(g)	Urethrotomy	...	...	...	...	...	...	7
(h)	For urethral fistula and abscess	...	...	...	...	...	...	10
(i)	Cystoscopy and ureteric catheterization	...	...	...	...	...	...	7
(j)	Urethral catheterization and passage of sounds	...	...	...	...	...	...	36
(k)	Others	...	...	...	...	...	...	...
(7) MALE ORGANS OF GENERATION :—								
(a)	Circumcision	...	...	...	...	...	...	61
(b)	Others for paraphimosis	...	...	...	...	...	...	112
(c)	Amputation of penis	...	...	...	...	...	...	2
(d)	Hydrocelotomy	...	...	...	...	...	...	103
(e)	For varicoccele...	...	...	...	...	...	...	2
(f)	Upon testis and epididymis	...	...	...	...	...	...	10
(g)	Others	...	...	...	...	...	...	43
(8) FEMALE ORGANS OF GENERATION :—								
(a)	Ovariectomy	...	...	...	...	...	...	14
(b)	Salpingotomy	...	...	...	...	...	...	6
(c)	Salpingostomy, for sterility	...	...	...	...	...	...	0
(d)	Myomectomy	...	...	...	...	...	...	2
(e)	Hysterectomy...	...	...	...	...	...	...	47
(f)	Hysteropexy	...	...	...	...	...	...	10
(g)	Caesarian section	...	...	...	...	...	...	26
(h)	Uterine suture	...	...	...	...	...	...	...
(i)	For extra-uterine gestation	...	...	...	...	...	...	...
(j)	Drainage of pelvic abscess	...	—	...	...	...	...	...
(k)	Instrumental delivery and destruction of foetus	...	...	...	...	...	...	108
(l)	For vesico or recto-vaginal fistula :—							
	(i) Plastic repair	...	...	...	...	...	...	8
	(ii) Uretero-colic anastomosis	...	...	...	...	...	...	1
(m)	Colporrhaphy and perineorrhaphy	...	...	...	...	...	...	23
(n)	Removal of uterine contents and or dilatation and curettage	...	...	...	...	...	...	174
(o)	Induction of labour or abortion	...	...	...	...	...	...	0
(p)	Insufflation of fallopian tubes	...	...	...	...	...	...	0
(q)	Uterine drainage	...	...	...	...	...	...	0
(r)	Examination and or manipulation of uterus or foetus	...	...	...	...	...	...	17
(s)	Upon cervix	...	...	...	...	...	...	66
(t)	Others	...	...	...	...	...	...	106

TABLE III—*continued*

<i>Nature of Operations</i>								<i>Number Performed</i>
(9) EYE :—								
(a)	For ectropion	...	...	...	...	...	...	33
(b)	For cataract	...	...	...	...	...	...	98
(c)	For glaucoma	...	...	...	...	...	...	7
(d)	Iridectomy	...	...	...	...	...	...	15
(e)	Enucleation and evisceration	...	...	...	...	...	...	24
(f)	Others	...	...	...	...	...	...	373
(10) EAR, NOSE AND THROAT :—								
(a)	Myringotomy	...	...	...	...	...	...	0
(b)	Mastoidotomy	...	...	...	...	...	...	7
(c)	Removal of foreign bodies	...	...	...	...	...	...	91
(d)	Reduction of nasal fracture	...	...	...	...	...	...	1
(e)	Resection of septum	...	...	...	...	...	...	8
(f)	Turbinectomy and or drainage of sinuses	...	...	...	...	...	...	14
(g)	Removal of tumours	...	...	...	...	...	...	40
(h)	Tonsillectomy, by guillotine...	...	...	...	...	...	...	658
(i)	Tonsillectomy, by dissection (both including removal of adenoids)	...	...	...	...	...	...	127
(j)	For quinsy	...	...	...	...	...	...	27
(k)	Uvulotomy	...	...	...	...	...	...	0
(l)	Laryngoscopy, bronchoscopy and oesophagoscopy	...	...	...	...	...	...	113
(m)	Others...	...	...	...	...	...	...	110
(11) MOUTH AND NECK :—								
(a)	Extraction of teeth	...	...	...	...	...	...	1,857
(b)	Upon jaws (including treatment of fractures)	...	...	...	...	...	...	20
(c)	Upon tongue and lips (including removal of tumours, but excluding plastic)	...	...	...	...	...	...	16
(d)	Excision or treatment of glands in neck	...	...	...	...	...	...	6
(e)	Tracheotomy	...	...	...	...	...	...	9
(f)	Thyroidectomy (including ligature of thyroid vessels)	...	...	...	...	...	...	2
(g)	For thyri-glossal cysts	...	...	...	...	...	...	3
(h)	Others	...	...	...	...	...	...	12
(12) CHEST :—								
(a)	Thoracotomy and pleural drainage	...	...	...	...	...	...	15
(b)	Lobectomy	...	...	...	...	...	...	0
(c)	Upon cardia	...	...	...	...	...	...	0
(d)	Phrenic avulsion	...	...	...	...	...	...	30
(e)	Artificial pneumothorax	...	...	...	...	...	...	93
(f)	Paracentesis	...	...	...	...	...	...	11
(g)	Others	...	...	...	...	...	...	14
(13) MAMMARY GLANDS :—								
(a)	Mastectomy	...	...	...	...	...	...	7
(b)	Excision of tumour	...	...	...	...	...	...	7
(c)	Incision of abscess	...	...	...	...	...	...	218

TABLE III—*continued*

<i>Nature of Operations</i>								<i>Number Performed</i>
(14) CRANIUM :—								
(a)	Decompression and treatment of fracture and haemorrhage	...	...	...	...	...	...	27
(b)	For intracranial tumour	...	...	...	...	...	...	1
(c)	Drainage of intracranial abscess	...	...	...	...	...	...	0
(d)	Others	...	...	...	...	...	...	0
(15) SPINAL COLUMN :—								
(a)	Laminectomy	...	...	...	...	...	...	9
(b)	Bone graft	...	...	...	...	...	...	8
(c)	Manipulation and or external fixation (for tuberculosis, fracture and other conditions, including application of plaster jacket)	...	...	...	...	...	...	243
(d)	Lumbar and cisternal puncture	...	...	...	...	...	...	62
(e)	Spinal injection	...	...	...	...	...	...	7
(f)	Others	...	...	...	...	...	...	11
(16) BONES :—								
(a) For fractures :—								
(i)	Open operations (including bone graft, application of plates and other mechanical aids)	...	...	...	...	...	...	141
(ii)	Manual and instrumental reduction and or application of splints and plaster	...	...	...	...	...	...	791
(b) For osteomyelitis, osteitis and periostitis :—								
(i)	Acute	...	...	...	...	...	...	38
(ii)	Chronic (including sequestrectomy and or application of plaster)	...	...	...	...	...	...	147
(c)	Removal of tumours	...	...	...	...	...	...	5
(d)	Others	...	...	...	...	...	...	365
(17) JOINTS :—								
(a) Arthrotomy :—								
(i)	For sepsis	...	...	...	...	...	...	0
(ii)	For removal of loose or foreign bodies	...	...	...	...	...	...	15
(b)	Excision of joint	...	...	...	...	...	...	2
(c)	Reduction of dislocation	...	...	...	...	...	...	39
(d)	Manipulation for other purposes	...	...	...	...	...	...	8
(e)	External fixation (including application of plaster)	...	...	...	...	...	...	238
(f)	Aspiration	...	...	...	...	...	...	3
(g)	Others	...	...	...	...	...	...	10
(18) AMPUTATIONS :—								
(a)	Of fingers	...	...	...	...	...	...	1
(b)	Of hand and forearm	...	...	...	...	...	...	1
(c)	Of arm	...	...	...	...	...	...	0
(d)	Of toes	...	...	...	...	...	...	20
(e)	Of foot and leg	...	...	...	...	...	...	3
(f)	Of thigh	...	...	...	...	...	...	2
(g)	Others	...	...	...	...	...	...	4

TABLE III—*continued*

<i>Nature of Operations</i>								<i>Number Performed</i>
(19) ARTERIES, VEINS AND NERVES :—								
(a)	For aneurysm	...	...	...	...	...	...	2
(b)	Ligature of vessels	...	...	...	...	...	...	11
(c)	For angioma	...	...	...	...	...	...	0
(d)	Injection of varicose veins	...	...	...	...	...	...	56
(e)	Nerve suture and neurolysis	...	...	...	...	...	...	4
(f)	Others upon nerves (including stretching and injection)	...	...	...	...	...	...	16
(g)	Others	...	...	...	...	...	...	17
(20) ORTHOPAEDIC AND PLASTIC OPERATIONS :—								
(a)	Osteotomy (for deformities)	...	...	...	...	...	...	22
(b)	Other treatment of deformities and contractures (including manipulation and application of splints and plaster)	...	...	...	...	...	...	480
(c)	For hare lip and cleft palate	...	...	...	...	...	...	11
(d)	Upon ears, nose and lips	...	...	...	...	...	...	4
(e)	For elephantiasis	...	...	...	...	...	...	9
(f)	Skin graft	...	...	...	...	...	...	68
(g)	Others	...	...	...	...	...	...	10
(21) CONDITIONS UNCLASSIFIED REGIONNALLY :—								
(a)	For ulcers (excluding skin graft)	...	...	...	...	...	...	5
(b)	For other septic conditions (including incision of abscesses and whitlows)	...	...	...	...	...	...	3,386
(c)	Suture and treatment of wounds (including tendon suture)	...	...	...	...	...	...	978
(d)	Excision of superficial tumours (including cysts)	...	...	...	...	...	...	183
(e)	Extraction of foreign bodies	...	...	...	...	...	...	149
(f)	Removal of glands	...	...	...	...	...	...	19
(g)	For bursitis and ganglion	...	...	...	...	...	...	12
(h)	Treatment of burns	...	...	...	...	...	...	8
(i)	Removal of parasites	...	...	...	...	...	...	0
(j)	Others	...	...	...	...	...	...	304

16. *Orthopaedic Surgery.* The Medical Superintendent of Floréal Hospital reports as follows:—

- (a) *Personnel.* During 1950 the following changes in the staff occurred. In May we were unfortunate to lose Miss Nicholson, the Orthopaedic Nursing Sister, who left the Colony on termination of contract. I must state here that Miss Nicholson did an immense amount of work at this hospital and was responsible for the high degree of nursing ability which has been reached by the untrained nursing staff at Floreal. I believe it will be difficult to find another person of her high abilities to replace her.

Miss Bonieux, who has achieved high nursing qualities resigned her post at the end of the year. It is hoped that Miss Bonieux who is now in Europe will decide to take up the Nursing career for which she is eminently suited.

Miss L. Scotter, Physiotherapist, is a recent addition to our trained staff and came to us after very good training and wide experience.

It must be pointed out that up to the time of writing, the Floreal Staff is sorely depleted. There is no trained Orthopaedic Nursing Sister and we are still short of one physiotherapist.

(b) *Work carried out.* With the departure of Miss Nicholson it became imperative that the Orthopaedic Surgeon should spend more time at Floreal Hospital. It was obvious that a lot of work normally carried out by a trained orthopaedic sister could not be passed over to an untrained nurse and had to devolve to the Medical Officer. Consequently the weekly outpatient clinic at Civil Hospital had to be stopped and only one series of district visiting by the Orthopaedic Surgeon could be done during the year.

The most striking features of the year are:—

- (i) The absence of an epidemic of poliomyelitis during the year.
- (ii) The tremendous increase in the work done compared to previous years.
- (iii) The continuous rise in the waiting list of patients for hospital admission.

This is a serious feature. During the year, although working at very full pressure, only 222 patients were admitted to hospital. At the same time the number on the waiting list increased by over 200. It is, therefore, obvious that unless the present admission rate be at least doubled there is no possibility of dealing with many patients who hopefully come to seek some relief to their sufferings.

(c) *Details of work carried out at Floreal Hospital during 1950.* The following details are given as a summary of the work that has been done at this hospital and they may prove of interest:—

No of patients in Hospital on 31st December 1949	...	159
„ „ 31st December 1950	...	161

1.—ADMISSIONS DURING CALENDAR YEAR 1950

A. *Poliomyelitis*:—

(a) Acute cases	...	...	...	...	...	4
(b) Old cases	...	...	...	...	...	66
					—	70

B. *Orthopaedic*:—

(a) Tuberculosis of the skeletal system	...	...	47
(b) Injuries	...	...	16
(c) Other orthopaedic conditions:—		—	63
(1) Diseases of bones and joints	...	...	39
(2) Congenital deformities	...	...	8
(3) Miscellaneous	...	...	42
		—	89

TOTAL ... 222

ANNUAL REPORT ON THE

II.—OPERATIONS

		<i>Major</i>	<i>Minor</i>	<i>Total</i>
Victoria Hospital	...	255	545	800
Floreal Hospital :—				
In Patients	...	134	466	600
Out Patients	...	20	837	857
	TOTAL	409	1,848	2,257

III.—TOTAL NO. OF PATIENTS WEARING INSTRUMENTS
UNDER SUPERVISION

Polio cases	...	...	795
Orthopaedic cases	...	...	253
			1,048

IV — ATTENDANCES OF PATIENTS AT DOCTOR'S CONSULTATIONS

Attendances	...	...	1,761
Re-attendances	...	...	4,442
			6,203

A Attendances of Poliomyelitis cases ... 1,109

B. Attendance of Orthopaedic cases —

(a) Tuberculosis.....	...	...	200
(b) Injuries	...	...	1,942
(c) Miscellaneous	...	...	2,952
			5,094
		TOTAL	6,203

Distribution of attendances at : —

Floreal Hospital	...	...	3,157
Victoria Hospital	...	...	1,636
Civil Hospital...	...	...	612
(Jan-May 1950)			
District Clinics	...	...	798
(Jan-May 1950)			
			6,203

V.—ATTENDANCES AT PHYSIOTHERAPY DEPARTMENT

Total No. of attendances ... 32,053

VI.—WAITING LIST FOR ADMISSION

(a) Poliomyelitis	...	205
(b) Orthopaedic	...	448
		653

17. *Ophthalmic Work.* The ophthalmological service is under a part-time specialist who holds four weekly sessions at the two main hospitals, namely Civil and Victoria. In addition, he is on call for all emergencies. During the year he represented the Colony at the 16th International Congress of Ophthalmology and was absent from the 9th of July to the 18th September,

The following figures indicate the work performed by him:—

Total cases examined	2653
Eye diseases proper... ..	2,072
General diseases affecting eyes	144
Refractions	304
Eye injuries... ..	163
Operations	350

18. *Dental Work.* The Dental Surgeon proceeded on overseas leave on the 10th May, 1950, and the Dental Clinic had to be closed down. Scarcity of practising dentists in Mauritius made this unavoidable. The work had therefore to come to a standstill pending the return of the Dental Surgeon to the Colony.

Dental treatment was confined to preschool children, school children, expectant and nursing mothers, hospital cases and Police personnel.

(a) In the course of 138 sessions, treatment was given to 3,918 patients and the attendances were as follows:—

Preschool children	455
School children	2,461
Expectant and nursing mothers	377
Hospital cases in-patients	273
Hospital cases out-patients... ..	219
Police personnel	133
TOTAL	3,918

(b) The nature of treatment was:—

Fillings in permanent teeth	1,764
Permanent teeth extracted... ..	524
Deciduous teeth extracted	1,248
Treatment of parodontal disease	521
Osteomyelitis of jaw	5
Fractures... ..	6
Other surgical operations	8

19. *Mental Hospital.* The report on the work of this hospital is at appendix II.

20. The statistics of morbidity and mortality in respect of hospitals and dispensaries are in Table IV, and the main causes of morbidity are enumerated in Table V.

TABLE IV

STATISTICS OF MORBIDITY AND MORTALITY (for Calendar Year 1950)

Cause Groups	Detailed List Numbers	Dispensaries			Hospitals					
		Cases Male	Cases Female	Total Cases	Male patients		Female patients		Total cases	Total deaths
					cases	dths.	cases	dths.		
A 1. Tuberculosis of respiratory system ...	001-008	119	110	229	324	53	180	29	504	
A 2. Tuberculosis of meninges and central nervous system ...	010	—	1	1	2	1	4	2	6	
A 3. Tuberculosis of intestines, peritoneum and mesenteric glands ...	011	—	—	—	7	—	5	1	12	
A 4. Tuberculosis of bones and joints ...	012-013	1	3	4	32	1	17	4	49	
A 5. Tuberculosis, all other forms ...	014-019	7	14	21	16	2	10	2	26	
A 6. Congenital syphilis ...	020	40	40	80	8	2	4	2	12	
A 7. Early syphilis ...	021	131	128	259	28	—	11	1	39	
A 8. Tabes dorsalis ...	024	—	—	—	—	—	—	—	—	
A 9. General paralysis of insane ...	025	—	—	—	—	—	—	—	—	
A 10. All other syphilis {	022-023	384	422	806	109	2	100	4	209	
	026-029									
A 11. Gonococcal infection ...	030-035	328	48	376	94	—	12	—	106	
A 12. Typhoid fever ...	040	—	—	—	156	22	153	18	309	
A 13. Paratyphoid fever and other Salmonella infections ...	041-042	—	—	—	—	—	—	—	—	
A 14. Cholera ...	043	—	—	—	—	—	—	—	—	
A 15. Brucellosis (undulant fever) ...	044	—	—	—	—	—	—	—	—	
A 16. Dysentery, all forms	045-048	1,939	1,412	3,351	240	6	74	1	314	
A 17. Scarlet fever ...	050	—	—	—	—	—	—	—	—	
A 18. Streptococcal sore throat ...	051	3	5	8	—	—	2	—	2	
A 19. Erysipelas ...	052	3	6	9	5	—	5	—	10	
A 20. Septicæmia and pyæmia ...	053	—	—	—	4	3	3	—	7	
A 21. Diphtheria ...	055	7	13	20	13	2	35	3	48	
A 22. Whooping cough ...	056	16	5	21	—	—	—	—	—	
A 23. Meningococcal infections ...	057	—	—	—	—	—	1	1	1	
A 24. Plague ...	058	—	—	—	—	—	—	—	—	
A 25. Leprosy ...	060	2	8	10	1	1	1	—	2	
A 26. Tetanus ...	061	3	1	4	56	21	47	19	103	
A 27. Anthrax ...	062	—	—	—	—	—	—	—	—	
A 28. Acute poliomyelitis	080	2	2	4	4	—	3	—	7	
A 29. Acute infectious encephalitis ...	082	—	—	—	—	—	—	—	—	
A 30. Late effects of acute poliomyelitis and acute infectious encephalitis ...	081, 083	—	—	—	37	1	30	—	67	
A 31. Smallpox ...	084	—	—	—	—	—	—	—	—	
A 32. Measles ...	085	5	2	7	—	—	—	—	—	
Carried over ...	...	2,990	2,220	5,210	1,136	117	697	87	1,833	

TABLE IV—*continued*

STATISTICS OF MORBIDITY AND MORTALITY (for Calendar Year 1950)

Cause Groups	Detailed List Numbers	Dispensaries			Hospitals					
		Cases Male	Cases Female	Total Cases	Male patients		Female patients		Total cases	Total dths.
					cases	dths.	cases	dths.		
Brought forward ...	...	2,990	2,220	5,210	1,136	117	697	87	1,833	204
Yellow fever ...	091	—	—	—	—	—	—	—	—	—
Infectious hepatitis ...	092	39	34	73	23	1	6	—	29	1
Rabies ...	094	—	—	—	—	—	—	—	—	—
Typhus and other										
ricketsial diseases	100-108	—	—	—	—	—	—	—	—	—
Malaria ...	110-117	6,491	6,897	13,388	135	5	74	5	209	10
Schistosomiasis ...	123	290	109	399	55	2	40	—	95	2
Hydatid diseases ...	125	—	—	—	—	—	—	—	—	—
Filariasis ...	127	49	69	118	68	—	19	—	87	—
Ankylostomiasis ...	129	5,778	6,681	12,459	163	—	151	—	314	—
Other diseases due to helminths	124, 126 128, 130	6,713	7,307	14,020	36	1	44	—	80	1
	036-039, 049, 054, 059									
All other diseases classified as infective and parasitic	063-074, 086-090, 093, 095, 096, 120-122, 131-138	2,836	2,210	5,046	115	1	52	—	167	1
Malignant neoplasm of buccal cavity and pharynx ...	140-148	12	11	23	7	1	6	—	13	1
Malignant neoplasm of oesophagus ...	150	—	—	—	3	—	2	1	5	1
Malignant neoplasm of stomach ...	151	—	—	—	27	5	6	1	33	6
Malignant neoplasm of intestine, except rectum ...	152, 153	—	—	—	1	—	3	—	4	—
Malignant neoplasm of rectum ...	154	—	—	—	3	1	1	2	4	3
Malignant neoplasm of larynx ...	161	1	2	3	5	—	2	1	7	1
Malignant neoplasm of trachea, and of bronchus and lung not specified as secondary ...	162, 163	—	—	—	1	1	1	—	2	1
Malignant neoplasm of breast ...	170	—	2	2	—	—	19	4	19	4
Malignant neoplasm of cervix uteri ...	171	—	9	9	—	—	91	6	91	6
Malignant neoplasm of other and unspecified parts of uterus	172-174	—	1	1	—	—	20	4	20	4
Malignant neoplasm of prostate ...	177	—	—	—	1	—	—	—	1	—
Malignant neoplasm of skin ...	190, 191	—	—	—	5	—	5	1	10	1
Carried over ...	...	25,199	25,552	50,751	1,784	135	1,239	112	3,023	247

TABLE IV—*continued*

STATISTICS OF MORBIDITY AND MORTALITY (for Calendar Year 1950)

Cause Groups	Detailed List Numbers	Dispensaries			Hospitals					
		Cases Male	Cases Female	Total Cases	Male patients		Female patients		Total cases	Total dths.
					cases	dths.	cases	dths.		
<i>Brought forward</i> ...	...	25,199	25,552	50,751	1,784	135	1,239	112	3,023	2
A 56. Malignant neoplasm of bone and connective tissue ...	196, 197	—	—	—	1	—	—	—	1	
A 57. Malignant neoplasm of all other and unspecified site	155-159, 160, 164, 165, 175, 176, 178-181, 192-195, 198, 199	3	2	5	19	3	33	—	52	
A 58. Leukæmia and aleukaemia ...	204	—	1	1	—	—	—	—	—	
A 59. Lymphosarcoma and other neoplasm of lymphatic and haematopoietic system	200-203, 205	3	2	5	7	—	3	—	10	
A 60. Benign neoplasms and neoplasms of unspecified nature	210-239	31	30	61	39	—	124	4	163	
A 61. Nontoxic goiter ...	250, 251	2	10	12	—	—	6	1	6	
A 62. Thyrotoxicosis with or without goiter ...	252	1	3	4	1	—	1	—	2	
A 63. Diabetes mellitus ...	260	58	122	180	101	5	98	8	199	
A 64. Avitaminosis and other deficiency states ...	280-286	1,213	1,854	3,067	188	8	257	5	445	
A 65. Anaemias ...	290-293, 240-245, 253, 254, 270-277, 287-289	4,842	15,681	20,523	581	17	1,085	35	1,666	
A 66. Allergic disorders; all other endocrine, metabolic and blood diseases	294-299	1,900	1,810	3,710	256	5	231	2	487	
A 67. Psychoses ...	300-309	7	6	13	125	—	84	—	209	
A 68. Psychoneuroses and disorders of personality	310-324, 326	51	44	95	81	—	56	—	137	
A 69. Mental deficiency ...	325	12	7	19	30	—	20	—	50	
A 70. Vascular lesions affecting central nervous system ...	330-334	49	20	69	104	21	30	9	134	
A 71. Nonmeningococcal meningitis ...	340	1	—	1	24	15	12	5	36	
A 72. Multiple sclerosis ...	345	—	—	—	4	—	1	—	5	
A 73. Epilepsy ...	353	141	147	288	70	1	42	1	112	
A 74. Inflammatory diseases of eye ...	370-379	1,578	1,487	3,065	79	—	68	—	147	
A 75. Cataract ...	385	152	244	396	77	—	96	—	173	
A 76. Glaucoma ...	387	25	16	41	5	—	7	—	12	
A 77. Otitis media and mastoiditis ...	391-393	1,267	1,283	2,550	27	—	20	—	47	
<i>Carried over</i> ...	...	36,535	48,321	84,856	3,603	210	3,513	182	7,116	3

TABLE IV *continued*

STATISTICS OF MORBIDITY AND MORTALITY (for Calendar Year 1950)

Cause Groups	Detailed List Numbers	Dispensaries			Hospitals					
		Cases Male	Cases Female	Total Cases	Male patients		Female patients		Total cases	Total deaths
					cases	dths.	cases	dths.		
Brought forward ...	...	36,535	48,321	84,856	3,603	210	3,513	182	7,116	392
All other diseases of the nervous system and sense organs	341-344. 350-352 354-369 380-384. 386, 388- 390, 394- 398	3,175	3,334	6,509	266	1	168	2	434	3
D. Rheumatic fever ...	400-402	21	20	41	13	—	26	1	39	1
D. Chronic rheumatic heart disease ...	410-416	17	3	20	9	1	9	—	18	1
1. Arteriosclerotic and degenerative heart disease ...	420-422	22	70	92	63	13	38	12	101	25
2. Other diseases of heart ...	430-434	168	279	447	148	34	98	16	246	50
3. Hypertension with heart disease ...	440-443	30	53	83	5	—	6	2	11	2
4. Hypertension without mention of heart ...	444-447	170	359	529	58	1	38	1	96	2
5. Diseases of arteries	450-456	111	144	255	74	9	23	4	97	13
6. Other diseases of circulatory system	460-468	406	426	922	236	1	60	3	296	4
7. Acute upper respiratory infections	470-475	647	933	1,580	48	—	41	—	89	—
8. Influenza ...	480-483	14,900	15,954	30,854	328	—	313	—	641	—
9. Lobar pneumonia	490	42	21	63	156	18	62	6	218	24
10. Bronchopneumonia	491	34	18	52	101	19	87	12	188	31
11. Primary atypical, other and unspecified pneumonia...	492, 493	14	9	23	83	2	32	3	115	5
12. Acute bronchitis ...	500	990	880	1,870	114	2	118	—	232	2
13. Bronchitis, chronic and unqualified ...	501, 502	1,918	1,240	3,158	366	18	222	4	588	22
14. Hypertrophy of tonsils and adenoids ...	510	455	737	1,192	110	—	164	—	274	—
15. Empyema and abscess of lung ...	518, 521	23	8	31	22	—	15	2	37	2
16. Pleurisy ...	519	70	35	105	66	3	30	—	96	3
17. All other respiratory diseases	511-517, 520 522-527	574	604	1,178	65	6	38	2	103	8
18. Diseases of teeth and supporting structures ...	530-535	10,274	10,999	21,273	69	—	48	—	117	—
19. Ulcer of stomach...	540	42	7	49	43	11	6	1	49	12
20. Ulcer of duodenum	541	159	24	183	167	13	15	1	182	14
21. Appendicitis ...	550-553	56	100	156	153	2	201	2	354	4
22. Intestinal obstruction and hernia	560, 561, 570	163	37	200	127	12	33	7	160	19
Carried over ...	...	71,106	84,615	155,721	6,493	376	5,404	263	11,897	639

TABLE IV—(continued)

STATISTICS OF MORBIDITY AND MORTALITY (for Calendar year 1949)

Cause Groups	Detailed List Numbers	Dispensaries			Hospitals					
		Cases Male	Cases Female	Total Cases	Male patients		Female patients		Total cases	Total death
					cases	dths.	cases	dths.		
<i>Brought forward</i> ...	...	71,106	84,615	155,721	6,493	376	5,404	263	11,897	63
A 103. Gastritis and duodenitis ...	543	960	1,168	2,128	34	—	46	—	80	—
A 104. Gastro-enteritis and colitis, except diarrhoea of the newborn ...	571, 572	3,105	2,376	5,481	144	28	127	17	271	4
A 105. Cirrhosis of liver	581	14	9	23	15	2	23	2	38	—
A 106. Cholelithiasis and cholecystitis ...	584, 585	132	103	235	52	2	37	1	89	—
A 107. Other diseases of digestive system	536-539	10,501	10,054	20,555	606	17	325	3	931	2
	542, 544, 545									
	573-580, 582,									
	583, 586, 587									
A 108. Acute nephritis ...	590	12	29	41	6	1	13	4	19	—
A 109. Chronic, other and unspecified nephritis ...	591-594	98	146	244	101	21	109	14	210	3
A 110. Infections of kidney	600	13	18	31	18	1	35	1	53	—
A 111. Calculi of urinary system ...	602, 604	7	7	14	19	—	6	1	25	—
A 112. Hyperplasia of prostate ...	610	—	—	—	16	2	—	—	16	—
A 113. Diseases of breast	620, 621	—	211	211	—	—	47	—	47	—
A 114. Other diseases of genito-urinary system	601, 603	1,360	4,199	5,559	467	5	553	1	1,020	—
	605-609									
	611-617									
	622-637									
A 115. Sepsis of pregnancy, childbirth and the puerperium ...	640, 641, 681	—	13	13	—	—	18	—	18	—
	682, 684									
A 116. Toxaemias of pregnancy, and the puerperium	642, 652	—	53	53	—	—	108	18	108	1
	685, 686									
A 117. Haemorrhage of pregnancy and childbirth ...	643, 644	—	25	25	—	—	74	9	74	—
	670-672									
A 118. Abortion without mention of sepsis or toxæmia ...	650	—	104	104	—	—	367	1	367	—
A 119. Abortion with sepsis ...	651	—	—	—	—	—	8	—	8	—
A 120. Other complications of pregnancy, childbirth and the puerperium	645-649	—	2,620	2,620	—	—	650	43	650	4
	673-680,									
	683									
	687-689									
<i>Carried over</i> ...	...	87,308	105,750	193,058	7,971	455	7,950	378	15,921	83

TABLE IV—(continued)

STATISTICS OF MORBIDITY AND MORTALITY (for Calendar Year (1949))

Cause Groups	Detailed List Num- bers	Dispensaries			Hospitals					
		Cases Male	Cases Female	Total Cases	Male patients		Female patients		Total cases	Total deaths
					cases	dths.	cases	dths.		
Brought forward ...	...	87,308	105,750	193,058	7,971	455	7,950	378	15,921	833
1. Infections of skin and subcutaneous tissue ...	690-698	6,721	3,976	10,697	1,090	4	617	10	1,707	14
2. Arthritis and spondylitis ...	720-725	490	596	1,086	134	—	124	—	258	—
3. Muscular rheumatism and rheumatism, unspecified ...	726, 727	4,013	5,391	9,404	135	—	99	—	234	—
4. Osteomyelitis and periostitis ...	730	37	15	52	85	—	40	—	125	—
5. Ankylosis and acquired musculoskeletal deformities	737 745-749	24	10	34	15	—	5	—	20	—
6. All other diseases of skin and musculoskeletal system {	700-716 731-736 738-744	3,754	3,719	7,473	301	2	129	1	430	3
7. Spina bifida and meningocele ...	751	—	—	—	3	2	1	1	4	3
8. Congenital malformations of circulatory system...	754	—	—	—	—	—	—	—	—	—
9. All other congenital malformations {	750, 752 753 755-759	13	10	23	17	4	15	3	32	7
10. Birth injuries ...	760, 761	—	—	—	4	2	2	1	6	8
11. Postnatal asphyxia and atelectasis ...	762	—	—	—	8	8	9	9	17	17
12. Infections of the newborn ...	763-768	130	113	243	6	1	9	5	15	6
13. Haemolytic disease of newborn ...	770	—	1	1	1	1	1	1	2	2
14. All other defined diseases of early infancy {	769, 771 772	4	10	14	17	13	11	5	28	18
15. Ill-defined diseases peculiar to early infancy, and immaturity unqualified ...	773-776	19	25	44	46	37	37	35	83	72
16. Senility without mention of psychosis ...	794	42	144	186	16	4	23	3	39	7
17. Ill-defined and unknown causes of morbidity and mortality {	780-793 795	5,090	5,532	10,622	425	26	440	20	865	46
Carried over ...	...	107,645	125,292	232,937	10,274	559	9,512	472	19,786	1,031

TABLE IV—continued

STATISTICS OF MORBIDITY AND MORTALITY (for Calendar Year 1950)

Cause Groups	Detailed List Num- bers	Dispensaries			Hospitals					
		Cases Male	Cases Female	Total Cases	Male patients		Female patients		Total cases	Total deaths
					cases	dths.	cases	dths.		
<i>Brought forward ...</i>	<i>...</i>	107,645	125,292	232,937	10,274	559	9,512	472	19,786	1,031
AE 138. Motor vehicle accidents {	E 810- E 835	130	25	155	229	9	38	1	267	10
AE 139. Other transport accidents {	E 800- E 802 E 840- E 866	392	33	425	264	12	40	3	304	15
AE 140. Accidental poisoning {	E 870- E 895	5	4	9	38	5	26	1	64	6
AE 141. Accidental falls {	E 900- E 904	2,853	941	3,794	786	14	220	4	1,006	18
AE 142. Accident caused by machinery ...	E 912	77	11	88	50	—	1	—	51	—
AE 143. Accident caused by fire and explosion of combustible material ...	E 916	36	13	49	31	5	26	4	57	9
AE 144. Accident caused by hot substance, corrosive liquid, steam, and radiation {	E 917, E 918	284	119	403	125	9	73	14	198	23
AE 145. Accident caused by firearm ...	E 919	—	—	—	8	—	1	—	9	—
AE 146. Accidental drowning and submer- sion ...	E 929	—	—	—	—	—	—	—	—	—
AE 147. All other acci- dental causes {	E 910, E 911 E 913- E 915 E 920- E 928 E 930- E 965	12,763	2,745	15,508	1,478	6	297	5	1,775	11
AE 148. Suicide and self-inflicted injury	E 970- E 979	—	—	—	21	4	15	1	36	3
AE 149. Homicide and injury purposely inflicted by other persons (not in war)	E 980- E 985	516	171	687	529	2	194	1	723	3
AE 150. Injury resulting from operations of war {	E 990- E 999	—	—	—	—	—	—	—	—	—
TOTAL ...	...	124,571	129,354	254,055	13,833	625	10,443	506	24,276	1,131

TABLE IV—*continued*

STATISTICS OF MORBIDITY AND MORTALITY (for Calendar Year 1950)

Cause Groups	Detailed List Numbers	Dispensaries			Hospitals					
		Cases Male	Cases Female	Total Cases	Male Patients		Female Patients		Total Cases	Total deaths
					Cases	dths.	Cases	dths.		
Total to A 137 brought forward ...		107,645	125,292	232,957	10,274	559	9,512	472	19,786	1,031
38. Fracture of skull {	N 800-									
	N 804	3	—	3	78	19	13	2	91	21
39. Fracture of spine and trunk {	N 805-									
	N 809	31	9	40	63	5	19	3	82	8
40. Fracture of limbs {	N 810-									
	N 829	438	164	602	474	8	148	1	622	9
41. Dislocation without fracture {	N 830-									
	N 839	47	12	59	32	—	11	—	43	—
42. Sprains and strains of joints and adjacent muscles {	N 840-									
	N 848	262	108	370	69	—	6	—	75	—
43. Head injury (excluding fracture) {	N 850-									
	N 856	849	205	1,054	314	2	64	3	378	5
44. Internal injury of chest, abdomen, and pelvis {	N 860-									
	N 869	309	107	416	22	8	3	2	25	10
45. Laceration and open wounds {	N 870-									
	N 908	6,968	1,438	8,406	875	1	165	1	1,040	2
46. Superficial injury, contusion and crushing with intact skin surface {	N 910-									
	N 929	6,611	1,543	8,154	1,241	—	314	—	1,555	—
47. Effects of foreign body entering through orifice {	N 930-									
	N 936	500	96	596	25	—	6	—	31	—
48. Burns {	N 940-									
	N 949	317	134	451	146	14	92	19	238	33
49. Effects of poisons {	N 960-									
	N 979	6	—	6	65	9	52	2	117	11
50. All other and unspecified effects of external causes {	N 950-									
	N 959									
	N 980-	715	246	961	155	—	38	1	193	1
	N 999									
TOTAL ...		124,701	129,354	254,055	13,833	625	10,443	506	24,276	1,131

NOTE :—Conditions classifiable under section XVII “ Accidents, Poisonings and Violence ” have been listed twice : in sub-section “ AE ” where these conditions are classified according to External Cause and in sub-section “ AN ” where they are classified according to Nature of Injury.

The above figures for hospitals do not include “ Delivery without complication ” (1,633 cases) which will bring the total number of cases treated in hospital to 25,909.

TABLE V

MAIN CAUSES OF MORBIDITY

<i>Disease</i>	<i>In-patients at hospitals</i>	<i>Out-patients at hospitals and Dispensaries</i>
Syphilis and its sequelae	260	1,145
Dysentery, all forms	314	3,351
Malaria	209	13,388
Ankylostomiasis	314	12,459
Other diseases due to helminths	80	14,020
Avitaminosis and other deficiency states	445	3,067
Anaemias	1,666	20,523
Allergic disorders ; all other endocrine, metabolic and blood diseases	487	3,710
Inflammatory diseases of eye	147	3,065
Diseases of the circulatory system	904	2,389
Influenza	641	30,854
Pneumonia	521	138
Bronchitis	820	5,028
Diseases of teeth and supporting structures	117	21,273
Gastro-enteritis and colitis, except diarrhoea of the newborn	271	5,481
Other diseases of digestive system	931	20,555
Diseases of the genito-urinary system	1,390	6,100
Complications of pregnancy, childbirth and the puerium*	1,225	2,253
Infections of skin and subcutaneous tissue	1,707	10,697
Muscular rheumatism, unspecified	234	9,404
All other diseases of skin and musculo-skeletal system	430	7,473
Accidents, poisonings and violence	4,490	21,118

(2) DISPENSARIES

21. Financial provision has been made for the building of a new dispensary at Triolet, a village of 5,200 inhabitants in the district of Pamplermousses and for the construction of a modern building at Petite Rivière in the district of Black River to replace the existing decrepit structure. There are at present 32 stationary dispensaries in the Colony while the needs of 60 smaller and more remote villages and hamlets are met by a mobile dispensary service. These units made 507 trips in 1950 and were attended by 46,653 patients. The total attendances at stationary dispensaries and at out patient departments of hospitals numbered 303,549.

* Excluding 1,633 cases of "Delivery without complication"

(3) TRAINING OF NURSING STAFF

22.—(a) Since 1948 the training of nursing staff has been raised to a standard much higher than that accepted in pre-war days. The course of training which was limited to two years including midwifery has been extended to three years for the general nursing certificate with an additional year for the midwifery certificate, and the nurses have been made aware that they will be considered for promotion to the Ward Sister Grade only if they have obtained the midwifery qualification. They are given facilities for following the course in midwifery while employed and remunerated as nurses.

Examinations are held in April and October and are set on a syllabus which is very similar to the British one. The object of obtaining reciprocity with Great Britain is kept constantly in mind.

(b) The educational standards of students varies from the Sixth Standard to the Senior Cambridge Certificate. All candidates applying for enrolment are interviewed by a Committee comprising the Deputy Director and two Matrons, and in the course of the interview, simple tests for suitability are used. Experience has shown that candidates with a low educational standard find difficulty in the theoretical part of the syllabus and very often in the practical work as well.

(c) The classrooms available in the training schools at Civil and Victoria Hospitals are unsuitable and insufficient for present numbers. Through lack of a properly designed building it has not yet been possible to adopt the "Block" system. The construction of the Nurses' Home approved for Civil Hospital will bring relief and provide adequate facilities for study, recreation and rest. The most pressing need is, however, for sister-tutors and it has not yet been possible to recruit them, although provision for these posts exists in the Estimates.

(d) There were 98 students under training on 31st December, 1950, of whom 61 are due to take the final nursing examination in April 1951. The number of dressers and nurses who passed their final examination in 1950 was 26.

(e) 4 nursing students are undergoing training in England as State Registered Nurses.

PART V

Public Health

(1) VITAL STATISTICS

23. Table VI is a summary of vital statistics for the year 1950.

TABLE VI

SUMMARY OF VITAL STATISTICS FOR 1950

Area of Mauritius : 720 square miles						
		<i>Males</i>	<i>Females</i>	<i>Total</i>		
Estimated population as on 30th June 1950 ...	231,142	233,593	464,735			
Density per square mile : 645						
Marriages : 3,050						
Marriage rate per 1,000 population : 13.1						
Live-births	11,826	11,284	23,110			
Live birth per 100 population : 49.7						
Still births : 1,410						
Still birth rate per 100 live births : 6.1						
Deaths	3,388	3,065	6,453			
Crude death rate per 1,000 population : 13.9						
Maternal deaths : 86						
Maternal mortality rate per 1,000 total births (live and still) : 3.5						
Infant mortality (under 1 year of age) ...	1,036	727	1,763			
Infant mortality rate per 1,000 births : 76.3						
Deaths from Pulmonary Tuberculosis ...	100	136	236			
Death rate from Pulmonary Tuberculosis per 1,000 population : 0.508						
Deaths from other forms of Tuberculosis ...	4	4	8			
Death rate from other forms of Tuberculosis per 1,000 population : 0.022						
Deaths from infective and parasitic diseases ...	283	692	975			
Death rate from infective and parasitic diseases per 1,000 population : 2.098						
Deaths from respiratory diseases	322	656	978			
Death rate from respiratory diseases per 1,000 population : 2.098						
Deaths from diseases of the digestive system ...	323	590	913			
Death rate from diseases of the digestive system per 1,000 population : 1.964						
Deaths from Malaria and Malarial Cachexia ...	76	312	388			
Death rate from Malaria and Malarial Cachexia per 1,000 population : 0.834						

(i) *Population*

24.—(a) *The* estimated population of Mauritius as at 31st December, 1950, was 475,386, exclusive of the pioneers who are in military employment overseas.

The natural increase, that is due to excess of births over deaths, in 1950 was 16,657. In the general population (including Chinese) this increase was 4,679 and in the Indian 11,978, while arrivals in the Colony exceeded departures by 1,447 and 565 respectively. The density of population was 645 per square mile for the whole island, while in the municipal area of the capital town, Port Louis, it was 32,000 per square mile.

The population at 31st December, 1950, was sub-divided as follows:—

Population					Males	Females	No. of males per 1,000 females
General (excluding Chinese)	...	...	...	...	74,043	82,443	898
Chinese	...	...	...	...	8,812	5,955	1,479
Indian	...	...	...	...	153,889	150,244	1,024
WHOLE POPULATION					236,744	238,642	992

All the rates in this report are based on the estimated mid-year population which was 464,735.

(b) There has been a remarkable increase in the population of Mauritius over the last four years. In the ten-year period from 1931 to 1940, the rate of natural increase computed on the mid-year population, was 3.8 per thousand; in the decennial period 1941-50 it was 15.5, and in the last 4 years the rate of natural increase was 27.1 per thousand.

(ii) Births

25.—(a) The number of live births during the year was 23,110, an increase of 2,638 on the number for 1949 and of 6,996 on the yearly average number of births for the ten years preceding 1950. The figure for 1950 is the highest ever recorded.

Population					Births			Male births per 1000 female Births
					Males	Females	Total	
General (including Chinese)	...	...	...	...	3,579	3,261	6,840	1,097
Indian	...	...	...	...	8,247	8,023	16,270	1,028
WHOLE POPULATION					11,826	11,284	23,110	1,048

The following are the birth rates, the two figures in brackets relating to 1948 and 1949:—

General population	...	...	40.7	(35.8 ; 37.3)
Indian population	...	...	54.8	(47.3 ; 51.0)
TOTAL POPULATION	...	...	49.7	(43.1 ; 46.0)

(b) Still-births, which are not included as either births or deaths, numbered 1,410 (758 males and 652 females) giving a rate of 6.1 per hundred live births. During the year 1949 there were 1,364 still-births which gave a rate of 6.7.

(iii) Deaths

26.—(a) Deaths registered in Mauritius numbered 6,453, corresponding to a rate of 13.9 per 1,000 of the population, the lowest on record in the history of the island. The month of maximum mortality was April with 619 deaths. In 1949 the highest figure was recorded in August with 718 deaths: in 1948 the maximum occurred in March: 1,563 deaths.

	General Population		Indian Population		Total	
	Males	Females	Males	Females	Males	Females
No. of deaths	1,112	1,049	2,276	2,016	3,388	3,065
Rates per 1,000	12.9		14.5		13.9	

The average death rates for the period 1941-50 were 22.1 for the general, 26.3 for the Indian and 24.7 for the whole population.

(b) Table VII gives a comparison of the causes of death for the past five years with the rates per 1,000 of the population :—

TABLE VII

Group	No. of deaths	Rates per 1,000				
		1950	1949	1948	1947	1946
1. Infective and parasitic diseases...	975	2.1	3.60	9.2	5.47	9.1
2. Cancer and other tumours ...	122	0.3	0.27	0.2	0.17	0.1
3. Rheumatism, diseases of nutrition ...	103	0.2	0.28	0.3	0.26	0.3
4. Diseases of the blood and blood forming organs ...	378	0.8	1.05	1.0	1.33	2.0
5. Chronic poisoning and intoxication ...	—	—	—	—	—	—
6. Diseases of the nervous system and sense organs ...	387	0.8	0.82	0.8	0.78	1.0
7. Diseases of the circulatory system ...	410	0.9	0.85	0.6	0.48	0.6
8. Diseases of the respiratory system ...	978	2.1	1.87	3.0	2.06	2.7
9. Diseases of the digestive system ...	913	2.0	2.21	2.4	2.37	4.6
10. Diseases of the urinary and genital system (non venereal or connected with pregnancy or the puerperium) ...	261	0.6	0.64	0.6	0.69	1.2
11. Diseases of pregnancy and childbirth and the puerperal state ...	86	0.2	—	—	—	—
12. Diseases of the skin and cellular tissue...	34	0.1	0.05	0.1	0.11	0.2
13. Diseases of the bones and organs of movement ...	7	—	0.01	—	—	—
14. Congenital malformation ...	10	—	—	—	—	—
15. Diseases peculiar to the first year of life	782	1.7	1.89	2.3	2.61	2.8
16. Senility, old age ...	202	0.4	0.50	0.6	0.88	1.2
17. Death from violence ...	193	0.4	0.42	0.4	0.40	0.4
18. Ill-defined causes of death ...	612	1.3	1.66	1.9	2.17	3.0

27.—(a) The percentage contributions to the total deaths made by the more important groups are shown below in Table VIII :—

TABLE VIII

Group	Percentage of total deaths Five years 1946-50				
	1950	1949	1948	1947	1946
1. Infective and parasitic diseases ...	15.1	21.7	38.5	27.2	30.8
4. Diseases of the blood and bloodforming organs ...	5.8	6.3	4.2	6.6	6.6
6. Diseases of the nervous system and sense organs ...	5.9	5.1	3.5	3.9	3.2
7. Diseases of the circulatory system ...	9.4	5.1	5.5	6.7	5.8
16. Senility, old age ...					
8. Diseases of the respiratory system ...	15.1	11.2	12.5	10.2	9.0
9. Diseases of the digestive system ...	14.1	14.7	10.2	11.8	15.7
15. Diseases peculiar to the first year of life...	12.1	11.4	9.5	13.0	9.5

(b) The decline in the percentage of mortality due to infective and parasitic diseases which had been very apparent in 1949 continued during 1950, the principal disease responsible for this fall being malaria.

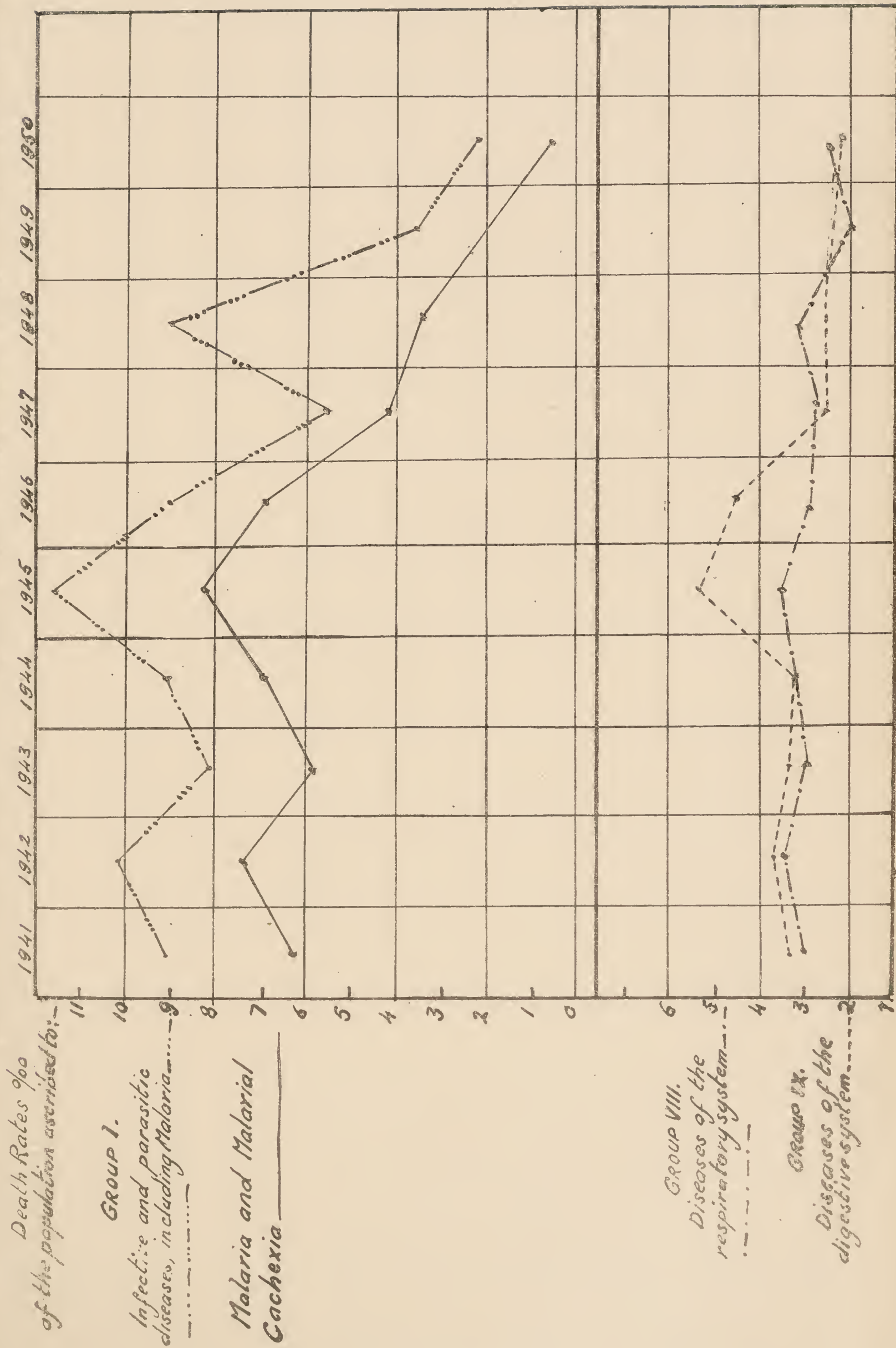
Deaths from this group of diseases which numbered 4,052 in 1948, 1,603 in 1949, fell to 975 in 1950, a figure equivalent to 2.09 per 1,000 living.

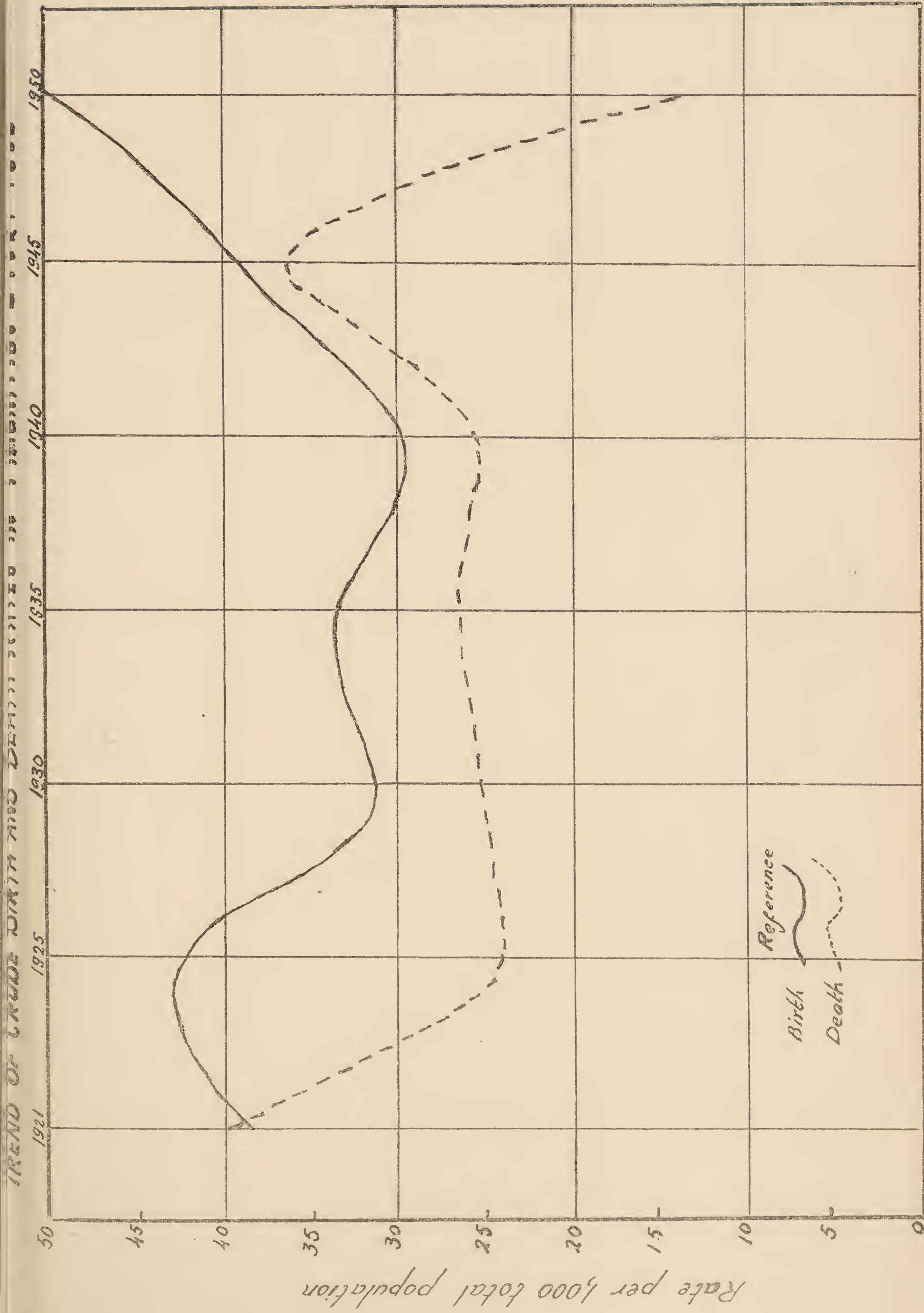
(c) Diseases of the respiratory system (which do not include tuberculosis) accounted for 15.15 per cent of the total deaths as compared with 11.25 per cent in 1949 and 12.53 per cent in 1948.

(d) The deaths due to diseases of the digestive system, which include diarrhoea and enteritis fell from 1,085 in 1949 to 913 in 1950. The figure for 1945 was 2,283 and that for 1941 was 1,288. The rate per 1,000 living was 1.96 as compared with an average of 3.4 in the preceding five years.

FIGURE 1.

COLONY DEATH RATES PER 1000 POPULATION FROM PRINCIPAL CAUSES 1941-1950





(e) The downward trend in the number of deaths due to diseases peculiar to the first year of life was accentuated in 1950. The figure for that year was 782 as compared with 842 for 1949 and 1,009 for 1948. The rate per 1000 living in 1950 was 1.7 as compared with 1.9 for 1949 and 2.8 for the period 1944 to 1948.

(f) The graph at figure I illustrates the fall in the principal death-dealing diseases in Mauritius for the ten-year period 1941-50.

(g) Table IX shows the number of deaths from the principal causes for the ten-year period 1941-50.

(h) The graph at figure II is published to indicate the trend of crude birth and death rates in Mauritius from 1921 onwards.

28.—(a) *Diseases of pregnancy, childbirth and the puerperal state.* 86 deaths were registered in this group, classified as under:—

Other diseases and accidents of pregnancy	...	15
Puerperal toxæmias		4
Other accidents of childbirth		67
		—
TOTAL	...	86
		—

(b) *The maternal mortality-rate.* The number of deaths ascribed to the puerperal state per 1000 births (including still-births) was 3.51. The rates for the previous five years were as follows:—

1945	...	...	...	14.97
1946	...	...	...	10.39
1947	...	...	...	5.25
1948	...	...	...	4.13
1949	...	...	...	3.80

(iv). *Infant and Child Mortality*

29.—(a) A very satisfactory reduction in deaths from diseases of infancy is to be recorded.

The infantile mortality rate (that is, the number of deaths of infants under one year of age, occurring in any year for every thousand live births registered the same year) was 76.3 per 1000 as compared with 91.0 in 1949 and an average of 146.7 per 1000 over the 10-year period 1940 to 1949. The decrease to a two-figure number which was apparent in 1949 showed further improvement in 1950.

(b) The deaths under five years of age were distributed as follows:—

	Age				Males	Females	Total
Under 3 months	...	...	...	...	688	483	1,171
3 months and under 6 months	...	...	...	...	157	105	262
6 „ „ 1 year	...	...	...	...	191	139	330
1 year „ 2 years	...	...	...	...	159	144	303
2 years „ 3 „	...	...	...	...	102	113	215
3 „ „ 4 „	...	...	...	...	45	43	88
4 „ „ 5 „	...	...	...	...	17	21	38
					—	—	—
TOTAL	...	...	...	...	1,359	1,048	2,407
					—	—	—

TABLE IX

DEATHS FROM PRINCIPAL CAUSES 1941-50—(INTERNATIONAL LIST, 1938 REVISION)

<i>Year</i>	...	...	<i>Group I</i>	<i>Group II</i>	<i>Group III</i>	<i>Group IV</i>	<i>Group V</i>	<i>Group VI</i>	<i>Group VII</i>	<i>Group VIII</i>	<i>Group IX</i>	<i>Group X</i>
1941	...	...	3,693	65	97	173	—	395	209	1,212	1,288	570
1942	...	...	4,160	67	134	274	—	416	197	1,368	1,507	680
1943	...	...	3,340	43	116	198	2	419	236	1,340	1,362	543
1944	...	...	3,807	57	123	255	2	412	249	1,166	1,344	470
1945	...	...	4,898	53	178	894	2	402	234	1,538	2,283	566
1946	...	...	3,862	57	112	833	2	407	239	1,138	1,969	525
1947	...	...	2,366	76	111	577	4	339	206	893	1,026	300
1948	...	...	4,052	88	130	451	—	378	294	1,318	1,078	262
1949	...	...	1,603	121	127	470	—	365	381	831	1,085	286
1950	...	...	975	122	103	378	—	387	410	978	913	261

Group	I	—	Infective and parasitic diseases.
	II	—	Cancer and other tumours.
	III	—	Rheumatism, diseases of nutrition and of endocrine glands, other general diseases and deficiency diseases.
	IV	—	Diseases of blood and blood-forming organs.
	V	—	Chronic poisoning and intoxication.
	VI	—	Diseases of the nervous system and sense organs.
	VII	—	Diseases of the circulatory system.
	VIII	—	Diseases of the respiratory system.
	IX	—	Diseases of the digestive system.
	X	—	Diseases of urinary and genital Organs

TABLE IX—continued
DEATHS FROM PRINCIPAL CAUSES 1941-50—continued

Year	Group XI	Group XII	Group XIII	Group XIV	Group XV	Group XVI	Group XVII	Group XVIII	Total deaths
1941	...	60	2	4	858	493	161	1,018	10,436
1942	...	75	3	6	1,052	540	184	1,092	11,927
1943	...	74	5	4	855	512	202	1,316	10,642
1944	...	70	5	7	1,207	533	204	1,273	11,355
1945	...	85	7	5	1,427	583	239	1,617	15,277
1946	...	67	7	1	1,193	489	186	1,256	12,528
1947	...	47	3	6	1,129	381	172	938	8,680
1948	...	44	5	9	1,009	285	171	859	10,518
1949	...	23	6	5	842	226	189	741	7,384
1950	...	34	7	10	782	202	193	612	6,453

Group	XI	—	Diseases of pregnancy, childbirth and the puerperal state.
	XII	—	Diseases of the skin and cellular tissue.
	XIII	—	Diseases of bones and organs of movement.
	XIV	—	Congenital malformation.
	XV	—	Diseases peculiar to the first year of life.
	XVI	—	Senility, old age.
	XVII	—	Deaths from violence.
	XVIII	—	Ill-defined causes of death.

(c) The principal causes of death in children under five years of age were in the following categories (International list of causes of death, 1938 Revision):—

Group				Under one year	One year and under five years
1.	Infective and parasitic diseases	...	...	214	131
3.	Rheumatism, diseases of nutrition etc.	...	...	7	14
4.	Diseases of the blood and blood-forming organs	...	...	8	22
6.	Diseases of the nervous system and sense organs	...	...	49	25
8.	Diseases of the respiratory system	...	...	280	115
9.	Diseases of the digestive system	...	...	318	220
15.	Diseases peculiar to the first year of life	...	...	778	—
17.	Deaths from violence	...	...	7	28
18.	Ill-defined causes of death	...	...	85	76

The total number of deaths of children under one year of age was 1,763 and of those of one year and under five years 644.

As the infant mortality rate is probably the best index to the social circumstances and the health conditions in an area, a graph indicating the trend of infant mortality rates in Mauritius from 1921 onwards is given at figure III.

V. Marriages

30. The number of marriages celebrated during the year was 3,050. The marriage rate which is expressed as the number of persons married per thousand of the population was 13.1 as compared with 16.3 for 1949 and 14.7 for 1948.

31. Table X shows births, still births, death rates, marriage rates and natural increase of the population and is intended to supply comparative data for the last ten years.

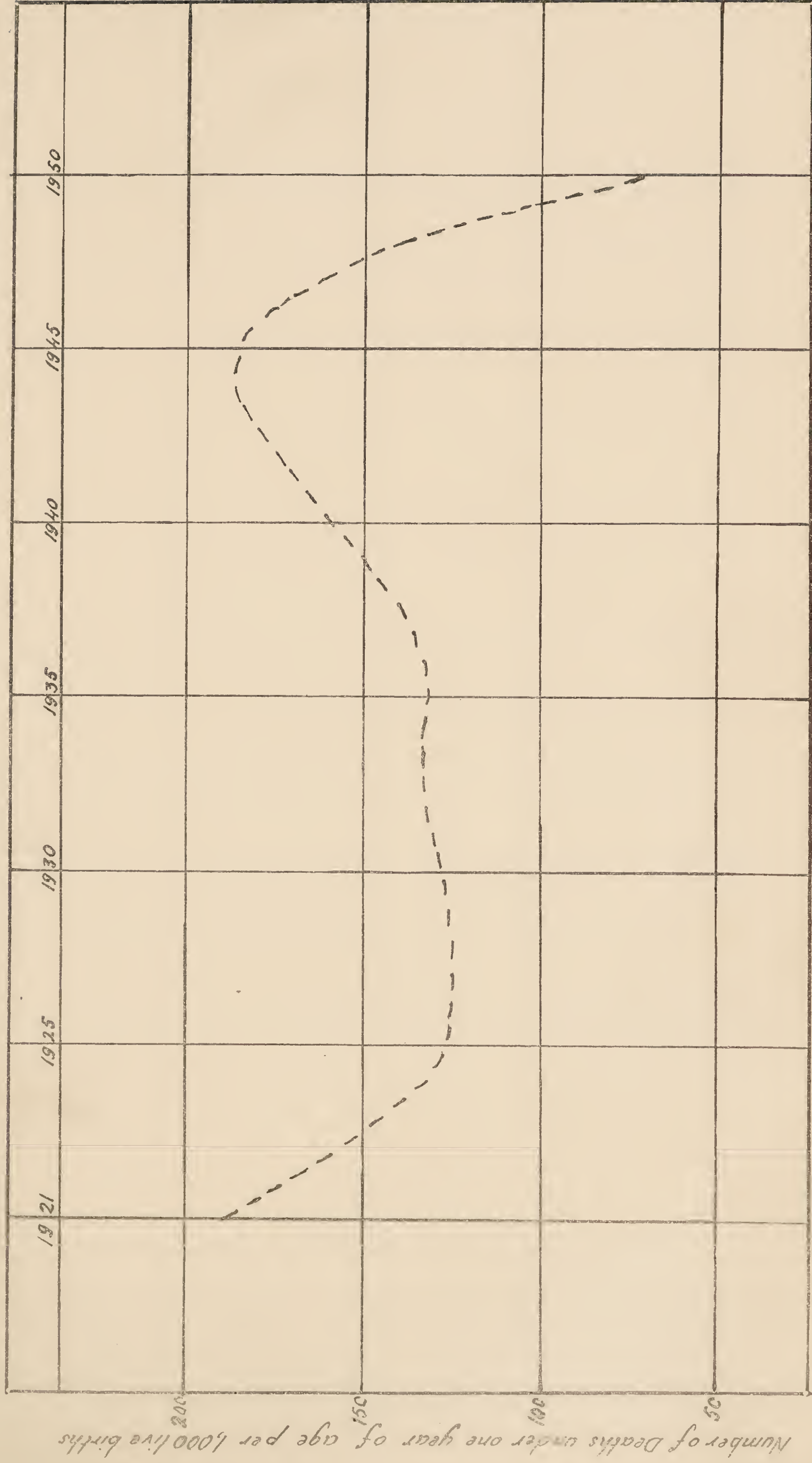
TABLE X

COMPARATIVE BIRTH, STILL-BIRTH, DEATH AND MARRIAGE RATES 1941-50

Year	Births		Still-Births		Death Rates		Marriage rate ‰ popu- lation	Natural increase of popu- lation
	Live Births	Rate ‰ popu- lation	No. of still- births	Rate ‰ total births	Infant mortality rate	Total death rate		
1941	13,430	33.0	1,100	8.2	134.8	25.6	23.3	2,994
1942	13,553	33.2	1,305	9.6	163.4	29.2	17.4	1,626
1943	13,604	33.2	991	7.3	141.6	25.9	15.0	2,962
1944	18,258	43.5	1,319	7.2	141.0	27.1	13.0	6,903
1945	16,290	38.5	1,484	9.1	188.0	36.1	12.0	1,013
1946	16,427	38.7	1,374	8.4	145.2	29.5	18.1	3,899
1947	18,926	43.8	1,277	6.7	113.9	20.1	17.5	10,246
1948	19,039	43.1	1,316	6.9	186.2	23.8	14.7	8,521
1949	20,472	46.0	1,364	6.7	91.0	16.6	16.3	13,088
1950	23,110	49.7	1,410	6.1	76.3	13.9	13.1	16,657

FIGURE III.

TREND OF INFANT MORTALITY RATES IN MAURITIUS 1921-1950



(2) PUBLIC HEALTH

(i) COMMUNICABLE AND INFECTIOUS DISEASES

32. *Malaria and antimalarial measures.* An account of the antimalarial measures carried out in recent years and the results then achieved were given in the Annual Report on the Medical and Health Department for 1948. In this report the opportunity was taken to review the position prior to the introduction of systematic destruction of adult anophelines by means of insecticides, a method instituted on a major scale in Mauritius in 1949. Comparative spleen and parasite surveys in 1943 and 1948 show a remarkable reduction in both cases. The deaths ascribed to malaria per 1000 living for the 5-year period 1944-48 were as follows:—

<i>Year</i>	<i>Deaths ascribed to malaria</i>		<i>Rate per 1000 living,</i>
1944	...	2,917	6.95
1945	...	3,534	8.34
1946	...	2,918	6.88
1947	...	1,782	4.12
1948	...	1,580	3.57

Admissions to hospital on account of malaria dropped from 3,500 in 1944 to some 1,600 in 1948.

The value of antilarval measures, systematically applied, had thus been clearly established, but the addition of anti-adult mosquito measures by the spraying of the internal surfaces of all houses and domestic animal harbourages with D.D.T. has markedly influenced the rate of reduction of malaria, the number of deaths ascribed to this disease having fallen to 936 representing 2.11 deaths per 1000 living in 1949 and to 388 representing 0.83 deaths per 1000 living in 1950. The change in position among the causes of mortality of this disease during the past few years has been dramatic. From occupying the first place figures up to 1945, malaria is now among the minor causes.

33. The incidence of malaria can be measured by means of regular spleen and parasite surveys. The following figures indicate a considerable fall in both spleen and parasite rates in the survey which took place during 1950:—

	<i>No. of children examined</i>		<i>Spleen rate %</i>	<i>Parasite rate %</i>
1948 survey	...	3,585	34.8	9.5
1949 do	...	12,105	15.3	2.4
1950 do	...	14,466	2.8	0.37

The low rate of transmission is further confirmed by the results of a survey of infants born since 1949. This survey has only been carried out in the coastal districts where the rates would be expected to be at their highest. In all, some 10,000 children have been examined varying in age from three months to two years, and 21 cases only have been found to carry the parasite of malaria in their blood. This represents a parasite rate of 0.22 per cent as compared with 10 per cent in children of the same age group in 1948.

TABLE XI
MALARIA ADMISSIONS BY DISTRICTS AND MONTHS DURING 1950

<i>Hospital</i>	<i>District</i>	<i>January</i>	<i>February</i>	<i>March</i>	<i>April</i>	<i>May</i>	<i>June</i>	<i>July</i>	<i>August</i>	<i>September</i>	<i>October</i>	<i>November</i>	<i>December</i>	<i>Totals</i>
Civil ...	Port Louis ...	6	12	10	8	6	11	2	1	7	1	5	3	72
Long Mountain...	Pamplemousses...	1	3	2	—	1	—	—	1	—	—	—	—	8
Poudre d'Or ...	Rivière du Rem- part ...	2	2	4	—	3	—	—	—	—	1	—	1	13
Flacq ...	Flacq ...	5	6	4	1	4	1	—	—	1	—	—	—	22
Mahebourg ...	Grand Port ...	5	4	1	6	5	—	2	4	2	4	1	1	35
Souillac ...	Savanne ...	6	1	—	—	—	—	—	—	—	—	—	1	8
Moka ...	Moka ...	—	1	—	—	—	—	—	—	—	1	1	—	3
Victoria ...	Plaines Wilhems	2	4	5	9	3	2	1	2	—	—	1	—	29
Mental ...	do. ...	—	1	3	1	2	1	—	—	—	—	—	—	8
Industrial School ...	do. ...	1	—	—	1	1	—	—	—	—	—	—	—	3
Beau Bassin Prisons ...	do. ...	1	1	—	3	—	—	—	1	—	1	—	1	8
TOTAL ...		29	35	29	29	25	15	5	9	10	8	8	7	209

34. Malaria notifications from dispensaries and hospitals in the districts showed a record low figure in 1947 when the rate of notification of the disease was 100.1 per 1000 of the population. This figure rose slightly in 1948 to 105 but the rate for 1950 was 12.9 per 1000, being a reduction of 87 per cent on the 1948 figure. Among these cases notified as being malaria by the dispensaries and hospitals during 1950, some 2,293 or 38 per cent have had blood slides taken before treatment. Of these slides, 71 or 3.1 per cent were found to be positive. This suggests that many notified cases were not in fact malaria but represent some other type of pyrexia.

Table XI indicates the number of cases of Malaria admitted to hospitals by districts and months during the year under review.

35. During the year 1950, 48,090 houses comprising some 220,697 rooms and out-houses were sprayed with a 5 per cent solution or suspension of D.D.T. This figure includes the special treatment of the two districts, Rivière du Rempart and Pamplemousses in January and March, following the abandonment of B.H.C. as a residual insecticide on economic grounds. The surface deposit applied was regularly checked and found to be standardized at a satisfactory level of about 150 milligrammes of D.D.T. per square foot.

Table XII summarises the results obtained from the routine flitting of houses in 1949 and 1950.

TABLE XII

A. Sprayed Coastal Zone						B. Unsprayed Central Plateau 1949-50	
			Before Spraying	After Spraying (1949)	After Spraying (1950)	Unsprayed Central Plateau (1949)	Unsprayed Central Plateau (1950)
Houses	...	...	6,389	15,087	27,345	7,565	7,922
A. Gambiac	...	...	1,943	130	163	3	—
A. Funestus	...	...	12,640	279	30	6	3
Aed. Aegyptii	...	...	1,572	1	—	11	15
Other Culicines	...	...	113,249	154,512	167,239	117,390	93,632
Mosquitoes per house	...	...	20.3	10.3	6.1	15.5	11.8

A detailed account of the entomological findings is given in the Entomologist's report in Appendix III.

36. The programme of antimalarial works and maintenance continued to be followed in the districts of Plaines Wilhems, Moka, Pamplemousses and Port Louis.

The works carried out are described below:—

Plaines Wilhems. As pointed out in the report for 1949, works in the South of the district are nearing completion. The drainage of marshes at Forest Side is in progress, while the marshy lands at Camp Caval and Route du Jardin, Curepipe, have been successfully drained in 1950. Tatamaka River has been partly canalised in its upper part. In the North of the district, the Bosquet "Grand Collector" has been completed in its entire length of 8,000 feet.

Moka. Work in the Réduit Canal has continued as from Helvetia, and at the end of 1950, only 900 feet remained to be done. The beds of some of the drains at Le Réduit grounds were paved during the year ; and side drains to Bonham Canal, Rivulet Canet and Feeder Angoon have been opened, while canalisation of Chaillet River has been completed. At " La Dagotière," drainage of marshy ground has been started.

Pamplemousses. During the year, considerable attention has been paid to a number of small marshes in Pamplemousses Village. Small drains and French drains have been constructed, thus decreasing very appreciably the number of breeding places in that locality.

Canalisation of River Citron has continued and a further length of 4,000 feet has been dealt with. At Calebasses, filling of a marsh has reclaimed about 2 acres of land.

Port Louis. The bed of River Lataniers, which was the outstanding malaria nuisance in the capital town, has been concreted and the Match Factory Drain at Cassis has been treated in a similar manner.

Pointe aux Sables marsh has been filled and will be under observation during the 1951 rainy season, after which a decision will be taken as to whether a central drain is required. It is probable that some more filling will be necessary after settlement of the surface.

The works completed so far suffered no appreciable damage from the heavy rainfall of the summer season.

37. *Anopheles Funestus* which would appear to have been the chief carrier of malaria in Mauritius has been reduced practically to the point of elimination by means of residual spraying of its resting places.

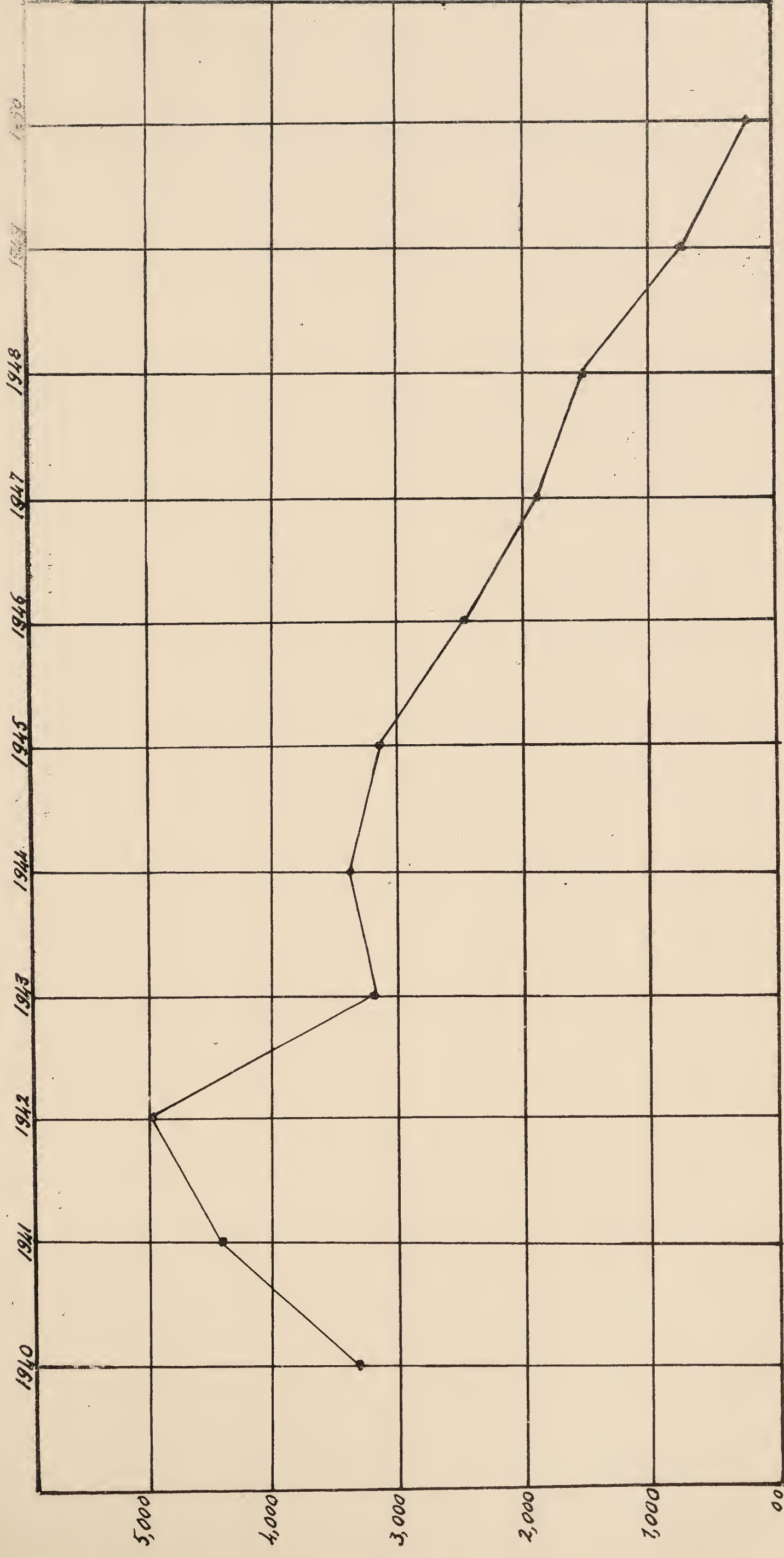
Anopheles Gambiae on the other hand has shown itself resistant to eradication by this means, and, although not found in houses, is still breeding profusely on the coast. It is now clear that eradication of this species by residual insecticides will not materialize. Accordingly, a larviciding pilot scheme, aiming at species eradication of *A. Gambiae*, was introduced in the district of Flacq in October. The results have so far been satisfactory and it is intended to extend this scheme so that it can embrace the whole island during 1951.

Until the reaction of *A. Gambiae* to the larviciding scheme has been observed over a period of two years, it will be difficult to give an indication as to the possibility of final eradication of this species. Although it has not been eradicated previously from its natural haunts in Africa, it should be borne in mind that unlike the mainland, there is no likelihood of vector infiltration in Mauritius and elimination once achieved can be maintained.

In this connection, it should be remembered that it was also considered unlikely that *A. funestus* would be eradicated completely from an area and yet it appears that this end has been practically attained in Mauritius. It is therefore to be hoped that *A. gambiae* will follow suit, although in its case the proposition is quite different.

FIGURE IV.

ADMISSIONS TO HOSPITAL - MALARIA - 1940-1950



38. Table XIII summaries the malaria morbidity and mortality figures for the 10-year period 1941-50 ; while Table XIV shows the number of deaths and the death rates from this disease by districts in respect of the 5-year period 1946-50.

TABLE XIII

MALARIA

Year	Cases treated in hospital	Deaths in hospital	Case mortality %	Cases treated at dispensaries and out-patient departments of hospitals	Deaths due to malaria in the Colony	Death rate per 100,000 population	Total deaths in the Colony	Percentage of deaths due to malaria to total deaths
1941	... 4,458	90	2·01	54,346	2,525	620	10,436	24·20
1942	... 5,014	110	2·19	53,969	3,054	749	11,927	25·61
1943	... 3,215	81	2·52	48,944	2,407	587	10,642	22·62
1944	... 3,512	104	2·96	59,107	2,917	695	11,355	25·69
1945	... 3,244	148	4·57	47,667	3,534	834	15,277	23·13
1946	... 2,522	106	4·20	50,990	2,918	688	12,528	23·29
1947	... 1,989	76	3·82	41,228	1,782	412	8,680	20·53
1948	... 1,576	66	4·19	57,389	1,580	358	10,518	15·02
1949	... 804	43	5·35	34,697	936	211	7,384	12·68
1950	... 209	10	4·78	13,388	388	83	6,453	6·01

TABLE XIV

DEATHS FROM MALARIA BY DISTRICTS 1946-50

District	Total number of deaths					Rate per 1,000 population				
	1946	1947	1948	1949	1950	1946	1947	1948	1949	1950
Port Louis	80	47	69	60	28	1·18	0·68	0·97	0·82	0·37
Stamper-mousses	474	236	187	109	51	13·99	6·81	5·32	3·04	1·36
Rivière du Rempart	239	166	179	97	61	6·82	4·59	4·85	2·55	1·53
St-Jacq	704	491	481	270	119	13·76	9·46	9·14	5·04	2·13
Grand Port	509	273	199	120	51	11·04	5·82	4·16	2·46	1·01
St-Jovane	257	114	112	71	45	7·82	3·40	3·29	2·05	1·25
St-Jaines Wilhems	337	273	153	69	15	2·67	2·10	1·15	0·51	0·11
St-Joka	106	63	52	26	1	4·53	2·62	2·11	1·03	0·03
St-Jack River	212	119	148	114	17	17·56	9·76	12·16	9·28	1·34
WHOLE COLONY	2,918	1,782	1,580	936	388	6·88	4·12	3·58	2·11	0·83

The graph at figure IV demonstrates the reduction in hospital admissions due to malaria since 1941.

39. The Malaria Advisory Board, of which the Director of Medical Services is the Chairman, met on seven occasions.

40. *Enteric Fever.* The cases of this disease notified in the year 1950 numbered 319, equivalent to an incidence rate of 0.686 per 1000 of the population as compared with 316 cases in 1949.

The number of deaths amongst these 319 cases was 51 giving a case mortality of 15.98 per cent as compared with 53 and 16.77 per cent the previous year.

2 cases occurred in Institutions. One at the Mental Hospital and one at the "Bonne Terre Immaculée Convent."

The incidence of this disease per 1000 of the population and the case mortality for the past five years were:—

Year				No. of cases notified	Rate per 1,000 of the population	Case mortality per cent
1945	...	...	...	315	0.743	28.57
1946	...	...	...	627	1.478	17.86
1947	...	...	...	405	0.936	21.48
1948	...	...	...	371	0.839	23.18
1949	...	...	...	316	0.711	16.77

The use of chloramphenicol in the treatment of enteric fever is giving encouraging results in the colony. Unfortunately, many hospital cases were first seen by a Medical Officer a long time after the onset of the disease and, in an appreciable proportion of such cases, there was no response to the drug.

41. *Diphtheria.* The cases of this disease notified in the year numbered 96, equivalent to an incidence rate of 0.206 per 1,000 of the population.

The number of deaths among the 96 cases was 9 giving a case mortality of 9.37 per cent.

The following figures indicate the number of cases of diphtheria notified, the incidence rate and the case mortality for the past five years:—

Year				No. of cases notified	Incidence rate per 1,000 population	Case mortality per 100
1945	...	...	...	34	0.080	5.88
1946	...	...	...	56	0.132	8.93
1947	...	...	...	85	0.196	8.23
1948	...	...	...	163	0.369	17.79
1949	...	...	...	154	0.346	14.28

42. *Filariasis.* 87 cases were treated in hospitals and 118 in dispensaries.

43. *Plague.* No cases of plague have been reported for a considerable number of years. There were none in 1950.

44. *Small Pox.* No case occurred.

Vaccinations performed were 13,787.

Successful vaccinations on first attendance...	...	...	...	12,922
„	second and subsequent attendances	...	...	550
				13,472
Unsuccessful vaccinations	...	...	...	200
Not observed	...	...	...	115
TOTAL				13,787

59.66 per cent of the children born were vaccinated by public vaccinators; and the above figures do not include infants vaccinated by private medical practitioners.

45. *Erysipelas.* There were 11 cases with 6 deaths.

46. *Tuberculosis.* Tuberculosis, which had ceased to be a notifiable disease from December 1932 to August 1949, has now been included in the list of notifiable diseases. On the other hand, compulsory medical certification of death which was instituted in 1948 in the towns of Port Louis, Curepipe, Quatre Bornes and Beau Bassin—Rose Hill was made applicable in 1949 to the entire districts of Port Louis, Moka and Plaines Wilhems, the population of which amounts to 51 per cent of the total population of the Colony. These two measures have provided a certain amount of precise information in regard to tuberculosis.

From 1st September, 1949 to 31st December, 1950, 1,321 cases of pulmonary tuberculosis were notified. In 1949, 301 deaths were attributed to this disease: 290 of the respiratory system, 3 of the meninges and central nervous system, 7 of the intestines and peritoneum and one of the vertebral column.

In 1950, there were 244 deaths: respiratory system 236, meninges and central nervous system 6, and intestines and peritoneum 2.

The following indicates the deaths per 100,000 of the population from tuberculosis of the respiratory system for the 10 year period 1941-50:—

Years	Death per 100,000 of the population		
1941	...	...	50.83
1942	...	...	47.06
1943	...	...	51.67
1944	...	...	51.49
1945	...	...	55.24
1946	...	...	45.49
1947	...	...	38.39
1948	...	...	60.20
1949	...	...	65.24
1950	...	...	50.78

Although it has not yet been possible to carry out a comprehensive survey of this disease and to institute a tuberculosis scheme through shortage of professional staff, a start has been made in that direction in that a Register of all cases notified and individual record cards are kept by the Health Department.

A medical officer has been selected for training in the subject of tuberculosis and will proceed to Cardiff towards September 1951.

It is now possible to obtain freeze dried vaccine from the Pasteur Institute of Paris and arrangements are being made for tuberculin testing and B.C.G. vaccination of selected groups in the community. It is hoped that a start will be made in June 1951.

47. *Leprosy.* The Medical Officer in charge of the Leper Hospital reports as follows:—

								Males	Females
(a) No. of patients on 1st January 1950	...	...	...	...	...	...	...	32	14
No. of patients admitted during the year	...	...	...	...	...	...	...	2	2
Patients returned from leave	...	...	...	...	...	...	...	2	0
								36	16
Patients discharged	...	...	...	...	...	...	...	2	1
Patient died	...	...	...	...	...	...	...	1	—
Remaining on 31st December 1950	...	...	...	...	...	...	...	33	15

(b) *Admissions.* Three patients (2 males, 1 female) were admitted from Rodrigues. They were all three of the lepromatous type, two being of moderate severity, and the third of mild severity.

The fourth patient was a case of pustular psoriasis sent from a Government Poor House on a mistaken diagnosis. She was kept for a few months and finally returned to the Poor House from which she came, her condition having entirely cleared up.

The two patients (neural cases) who returned from leave were old burnt-out cases.

(c) *Discharges.* Two former lepromatous patients (male) were discharged, one being employed as servant in the Hospital. The other is continuing attendance as out-patient, and receives weekly injections of soluble sulphetrone.

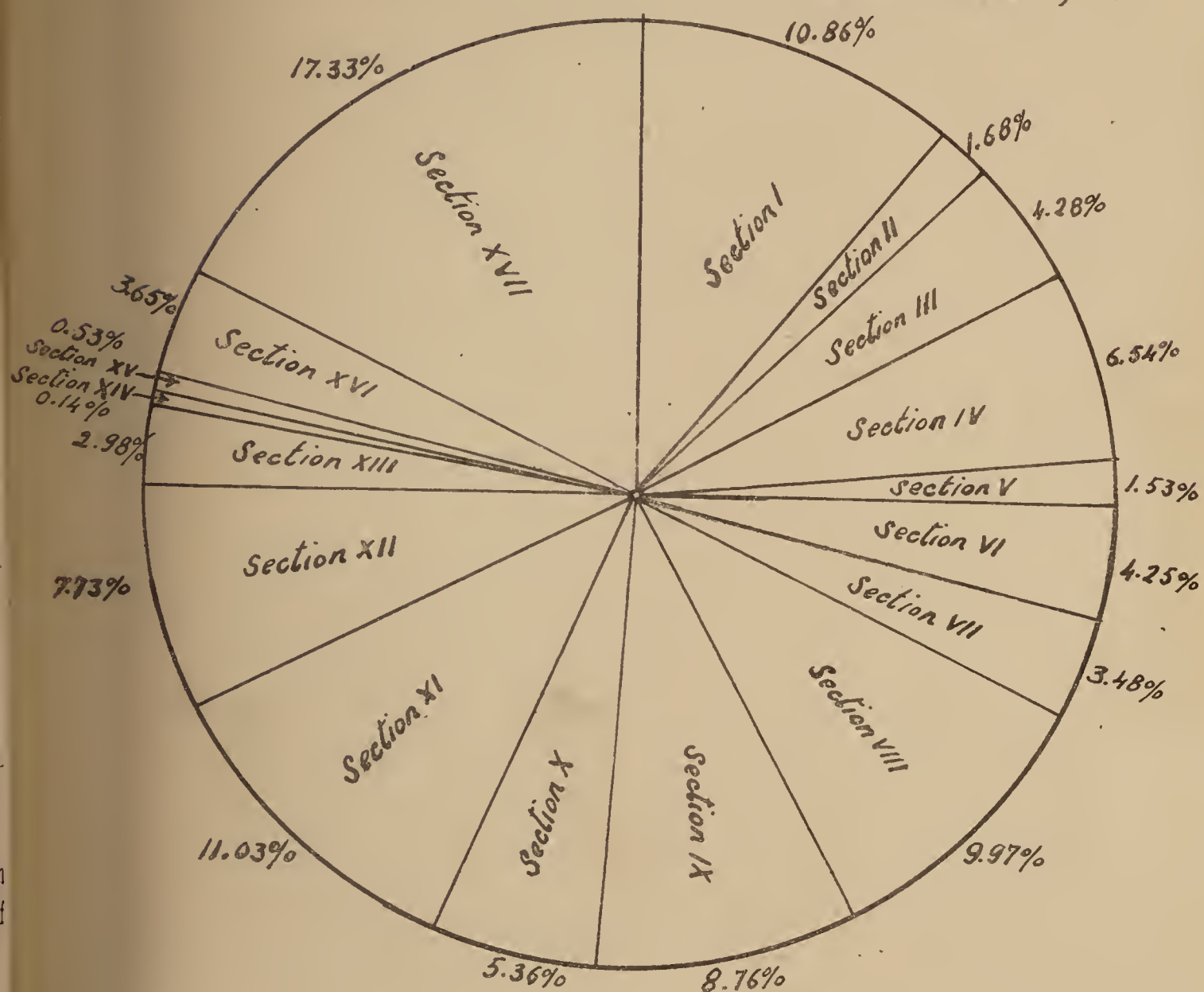
(d) *Death.* One old patient who had been ailing from high blood pressure for some considerable time collapsed suddenly and died from cerebral haemorrhage.

FIGURE V.

YEAR 1950

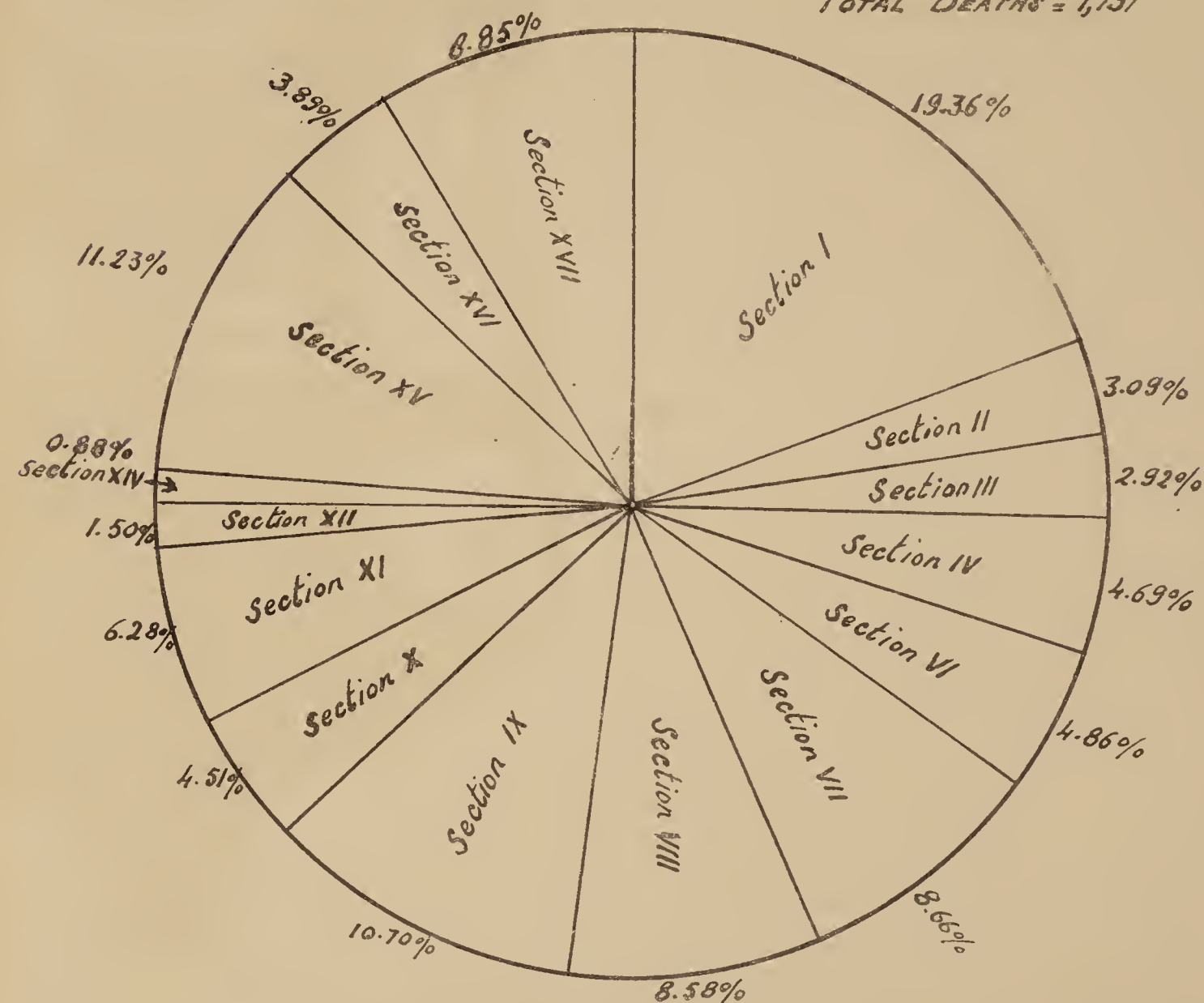
Proportion in percentages of diseases in hospital, by Sections of the International Statistical Classification of diseases, 1948, to total cases treated in hospital.

TOTAL INCIDENCE = 25,909



Proportion in percentages of deaths in hospital, by Sections of the International Statistical Classification to total deaths in hospital.

TOTAL DEATHS = 1,131



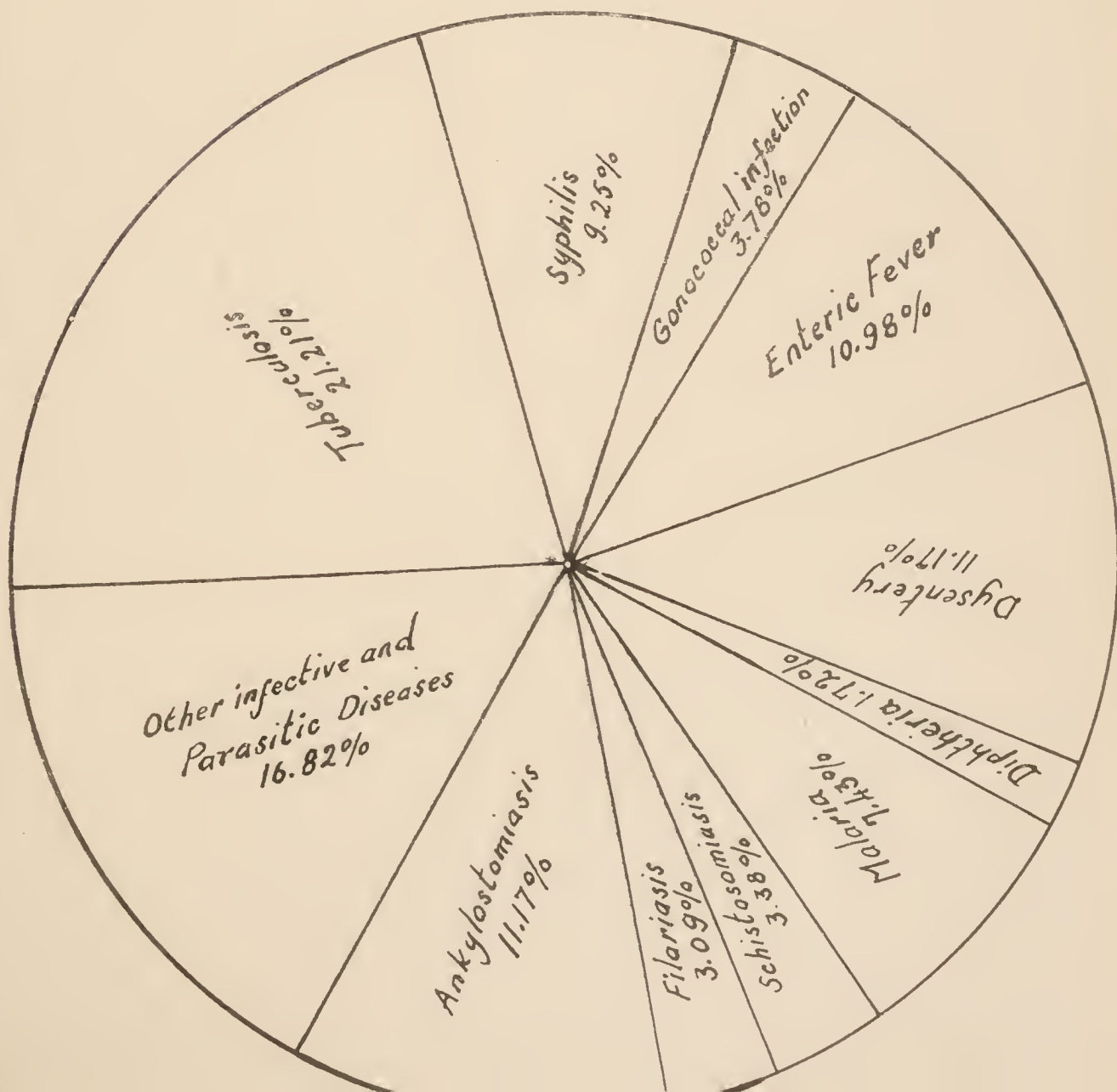
REFERENCE

- Section I. Infective and Parasitic Diseases.
 Section II. Neoplasms.
 Section III. Allergic, Endocrine system, Metabolic and Nutritional Diseases.
 Section IV. Diseases of the blood and blood-forming organs.
 Section V. Mental, Psychoneurotic and personality disorders.
 Section VI. Diseases of the Nervous System and Sense Organs.
 Section VII. Diseases of the Circulatory System.
 Section VIII. Diseases of the Respiratory System.
 Section IX. Diseases of the Digestive System.

- Section X. Diseases of the Genito-Urinary System.
 Section XI. Deliveries and Complications of Pregnancy, Childbirth and the Puerperium.
 Section XII. Diseases of the skin and cellular tissue.
 Section XIII. Diseases of the Bones and Organs of movement.
 Section XIV. Congenital Malformations.
 Section XV. Certain Diseases of early infancy.
 Section XVI. Symptoms, Senility and ill-defined conditions.
 Section XVII. Accidents, Poisonings and Violence.

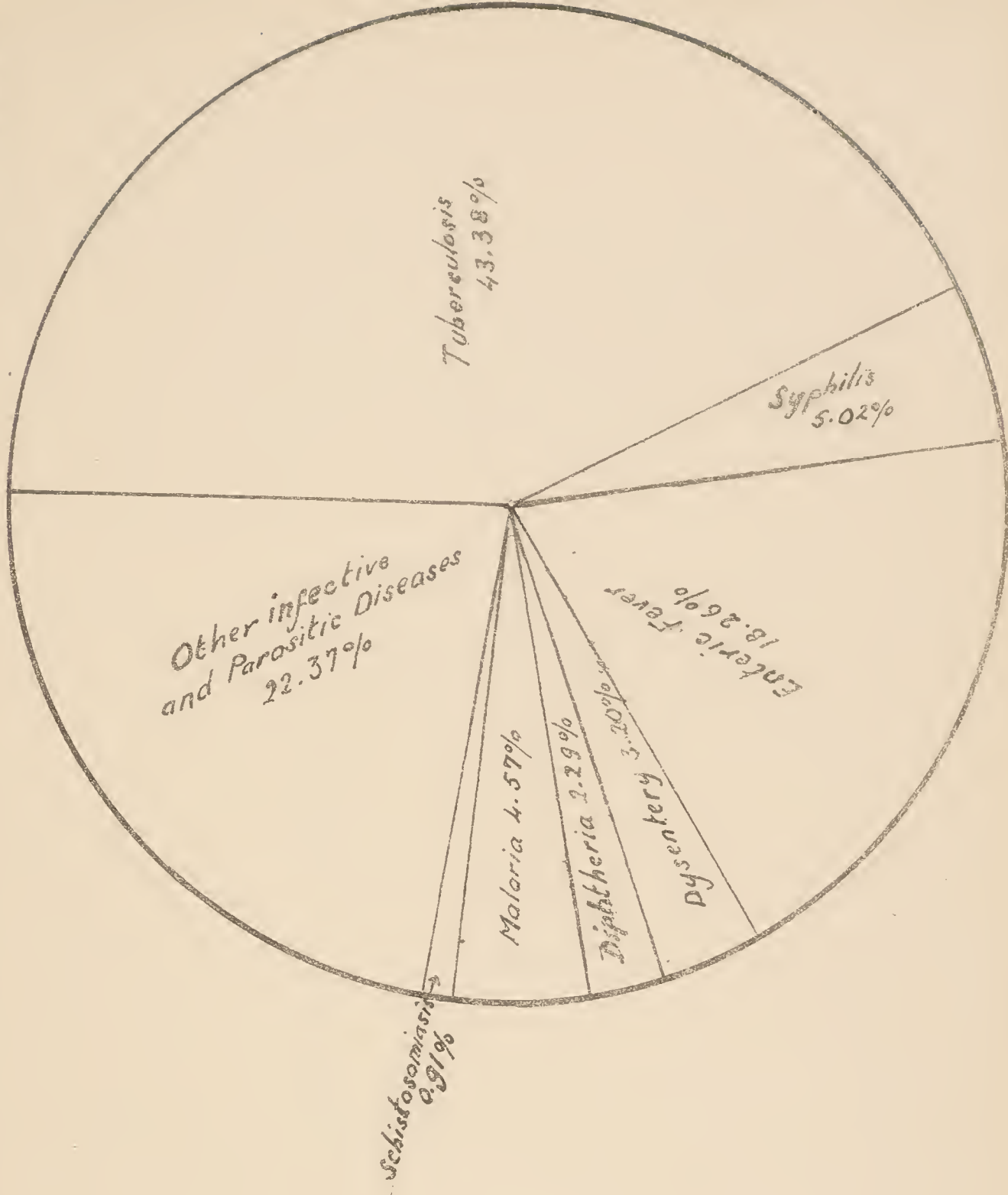
Proportion in percentages of certain infective and parasitic diseases treated in hospital to total cases of infective and parasitic diseases treated.
(Section I of International Statistical Classification of diseases injuries and causes of death, 1948).

TOTAL INCIDENCE = 2,814



Proportion in percentages of deaths in hospital due to certain infective and parasitic diseases to total deaths in hospital due to infective and parasitic diseases.

TOTAL DEATHS = 219



(e) *Treatment.* All lepromatous cases (23) are now under sulphetrone therapy, 19 receiving sulphetrone by mouth or by injection and 4 receiving avlosulfone by mouth. The four patients receiving avlosulfone were intolerant of Sulphetrone, but stand avlosulfone with impunity. The improvement noted during the year, specially on the female side is reflected in the following figures giving the classification of cases according to type and severity of the disease. The figures in brackets are those for last year (1949).

Male patients :—

Neural cases	...	17
Mild type ...	...	2 (3) one died
Moderate severity	...	3 (3)
Advanced	...	12 (10) 2 patients returned from leave
Lepromatous cases	...	16 cases (15) 3 admissions, 2 discharges
Mild	...	3 (3)
Moderate	...	4 (5)
Advanced	...	5 (7)
Cured but blind	...	1 (1)
Apparently cured	...	3 (0)

Female patients :—

Neural cases	...	5
Mild	...	1 (1)
Moderate	...	1 (1)
Advanced	...	3 (3)
Lepromatous cases	...	10 (9) 1 admission
Mild	...	3 (6)
Moderate	...	3 (1)
Advanced	...	0 (2)
Apparently cured	...	4 (0)

The country of origin of the patients under treatment is as follows :—

	<i>Mauritius</i>	<i>Rodrigues</i>	<i>Oil-Islands</i>	<i>India</i>	<i>China</i>	<i>Total</i>
Male ...	16	12	2	2	1	33
Female ...	3	11	1	—	—	15

48. *Venereal Diseases.* 260 cases of admission for syphilis and 11 deaths were recorded from the hospitals during the year. 106 cases of gonococcal infection were treated. At the dispensaries, 1,145 cases of syphilis and 376 cases of gonococcal infection were treated during the year under review.

49. *Ankylostomiasis.* 314 cases were treated in hospitals and 12,459 in the dispensaries. The total number of deaths ascribed to this disease was 5.

50. *Schistosomiasis.* During the year, 95 cases were treated in hospitals and 399 at the dispensaries.

51. Figure V shows the proportion in percentages of diseases treated in hospital, by Sections of the International Classification of Diseases, 1948, to total cases treated, whilst Figure VI shows the proportion in percentages of certain infective and parasitic diseases treated in hospital to total cases of infective and parasitic diseases treated. Table XV indicates the number of cases of the main notifiable diseases by districts for the year 1950, and Table XVI the monthly notifications of the same diseases.

TABLE XV

NOTIFIABLE CONTAGIOUS AND INFECTIOUS DISEASES

CALENDAR YEAR 1950

		<i>Typhoid Fever</i>	<i>Puer- peral Fever</i>	<i>Diphtheria</i>	<i>Erysipelas</i>	<i>Acute Polio- myelitis</i>	<i>Tuber- culosis</i>	<i>Cerebro- Spinal Meningitis</i>
Port Louis ...	...	44	—	14	1	1	181	—
Pamplemousses ...	...	57	—	3	1	2	87	—
Rivière du Rempart		54	—	5	1	2	51	—
Flacq ...	...	54	3	8	1	—	76	—
Grand Port ...	...	28	—	4	4	1	61	—
Savane ...	...	12	—	1	1	2	62	—
Plaines Wilhems ...	...	43	—	52	2	2	223	1
Black River ...	...	21	1	4	—	—	29	—
Moka ...	...	6	—	5	—	—	32	—
TOTALS ...	...	319	4	96	11	10	802	1

TABLE XVI

MONTHLY NOTIFICATIONS OF MAIN INFECTIOUS DISEASES DURING 1950

<i>Months</i>		<i>Typhoid Fever No. of Cases</i>	<i>Puerperal Fever No. of Cases</i>	<i>Diphtheria No. of Cases</i>	<i>Erysipelas No. of Cases</i>	<i>Acute Po- liomyelitis No. of Cases</i>	<i>Tuber- culosis No. of cases</i>	<i>Cerebro- spinal meningitis No. of Cases</i>
January ...	...	24	—	7	2	1	72	—
February ...	...	21	—	7	1	1	72	—
March ...	...	31	2	12	2	1	76	1
April ...	...	25	—	13	4	2	95	—
May ...	...	30	1	6	—	1	79	—
June ...	...	29	—	2	—	1	59	—
July ...	...	23	1	17	—	2	57	—
August ...	...	22	—	5	—	—	39	—
September ...	...	30	—	10	—	—	78	—
October ...	...	33	—	3	—	1	50	—
November ...	...	22	—	5	1	—	63	—
December ...	...	29	—	9	1	—	62	—
TOTALS ...	...	319	4	96	11	10	802	1

2. NUTRITION AND NUTRITIONAL DISEASES

52. The report of the Assistant Nutrition Officer is published as Appendix IV.

The following is a summary of the work done:—

- (a) *Village Health Workers.* The Village Health Workers attached to the Social Welfare Centres are proving most helpful in the rural areas. During the year, 5,211 families were visited by them and the advice they are providing on nutrition and mothercraft in the homes of the people is of vital importance. In addition, they helped in the various activities of the Social Welfare Centres ; and two of them are even assisting Medical Officers of the Department on their consulting days.
- (b) *Camp Diable Day-Nursery.* The first day-nursery to be established in Mauritius was set up in Camp Diable under the aegis of the Village Council. This day-nursery, perforce small, is still on an experimental basis, but it has been working most satisfactorily.
- (c) *School Meals.* The Milk Distribution Scheme started in April and full cream milk is supplied to all Primary schools of the island.
- (d) *Survey Work.* A questionnaire survey was carried out in some schools in different areas which were selected as representing different living conditions. A survey of food deficiency signs among the children attending those schools was made and evidence of food deficiency was generally recorded, particularly in the schools of Black River district and of Poudre d'Or village.
- (e) *Work at Institutions.* Advice and help were given to those responsible for the management of orphanages and poor-houses. The diet at the Beau Bassin Prisons was kept under regular supervision and food yeast was incorporated in the pulses issued to the prisoners.
- (f) *Experimental Work.* Experiments have been carried out in a residential institution for orphans with a view to ascertaining the efficacy of " Cliftol " on malnourished children.
- (g) *Talks.* These were given to mothers and girls at two Social Welfare Centres and also to schoolchildren.

53. The following nutritional diseases were recorded during the year:—

<i>Cases treated</i>	<i>In hospitals</i>	<i>At dispensaries</i>
Beriberi	1	1
Pellagra	79	36
Scurvy	1	4
Active rickets	2	7
Other avitaminoses ...	362	3,019
	445	3,067

3. FOOD AND DRUGS IN RELATION TO HEALTH AND DISEASE

54.—(a) *Food supplies.* On the whole, the foodstuffs offered to the public are wholesome and of good quality. Climatic conditions having been favourable throughout the year, locally produced food supplies were in general satisfactory. Food inspection was maintained and although the difficulties of control are great, especially in rural areas, the activities of the food inspectorate during the period under review are very commendable. There was an expansion of activity on the control of imported canned foodstuffs, as the supply is now more plentiful.

Unfortunately, adulteration of milk is still too common in spite of imprisonment and heavy fines, and it seems that it will require a long time before legislation, propaganda and competition can achieve the success which is expected of them.

In 1950 there were 400 successful prosecutions ; fines imposed amounted to Rs. 13,919 and imprisonment reached the total of 25 months, 21 weeks and 30 days as shown in Table XVII:—

TABLE XVII
PROSECUTIONS FOR ADULTERATION OF MILK

District or Section	Number of prosecutions	Sentence			Prosecutions under the Public Health Ordinance, 1925	
		Imprisonment			Number of prosecutions	Fines Rs.
		months	weeks	days		
Port Louis District . . .	63	18	—	—	115	1,321
Pamplemousses District	22	—	—	—	32	468
Rivière du Rempart District	39	—	—	—	94	905
Flacq North Section . . .	62	—	—	—	41	566
Flacq South „ . . .	—	—	—	—	11	47
Mahebourg „ . . .	26	—	—	—	152	1,009.50
Rose Belle „ . . .	11	3	—	15	24	96
Savane District . . .	35	—	6	15	101	528
Curepipe Section . . .	54	—	9	—	33	460
Vacoas „ . . .	31	—	—	—	42	910
Rose Hill „ . . .	21	4	6	—	66	1,632
Black River District . . .	18	—	—	—	23	159
Moka „ . . .	18	—	—	—	10	110
TOTALS . . .	400	25	21	30	744	8,211.50

(b) *Slaughter houses and Markets.* There are six public and one private slaughter-houses in Mauritius. The opening of one modern abattoir at Pascal in the district of Flacq on the 18th September 1950 resulted in the closing of two private abattoirs, one at Centre de Flacq and one at St. Julien, and of one public abattoir at Pamplemousses, which had had their day. The public abattoirs administered by the Municipality of Port Louis, the Township Boards of Beau Bassin—Rose Hill and Curepipe and the new slaughter-house at Flacq are each controlled by a qualified Veterinary Officer. In other places, the supervision rests with the sanitary staff.

There are twelve markets in the Colony.

4. GENERAL MEASURES OF SANITATION

55. *Health Inspection.* On 31st December, 1950, the staff of Sanitary Inspectors consisted of:—

3 Senior Sanitary Inspectors, 5 Inspectors Grade I; 12 Inspectors Grade II and 30 Inspectors Grade III.

For sanitary inspection, the area of the town of Port Louis is divided into six sections, Plaines Wilhems district into three sections and the remaining districts into seven divisions, which comprise a total of nine sections.

The inspections recorded as made by the Sanitary Inspectors during the year are listed in Table XVIII.

The notices served are enumerated below:—

Written request notices	...	...	...	...	5,318
Formal written notices	...	...	...	...	3,641
Orders under the Prevention of Malaria Ordinance					2,225

Prosecution for failure to comply with notices and orders was entered in 744 cases and the total amount of fines collected was Rs. 8,211.50.

56. *Conservancy Services.* In the Municipal and township areas the services have been maintained at a reasonably good level consistent with the necessity for the sweeping of streets, the removal of refuse and the disposal of night soil. In certain places, equipment and the labour provided have been improved and increased and in one area, the refuse collected is composted and subsequently used by a neighbouring sugar estate. It must be stated here that the lack of co-operation and understanding on the part of the public renders the task of the authorities responsible for the cleansing services much more difficult. In rural areas, an interesting development has been the handing over of the conservancy services which were formerly entrusted to contractors to Village Councils, which under the guidance of the District Commissioners and the Health Officers are doing excellent work. The enthusiasm with which the members of the recently born Village Councils have taken to their new responsibilities is praiseworthy, and most of the villages are now appreciably cleaner than they used to be. The Village Councils receive grants-in-aid from Government for the share they are taking in the application of measures of sanitation.

57. *Housing.* There is need for more and more houses and the present shortage is indeed a very serious problem. The problem is partly economic, because many inhabitants cannot afford rents which would meet the present prices of buildings. Government, the Municipality of Port Louis and the Townships Councils are active in the preparation and financing of schemes and new legislation is being considered; the sugar estates have made headway; private enterprise has provided a certain number of buildings in spite of high costs and difficulties in obtaining materials.

If however, the houses were occupied in the manner originally intended, there would be no reason for complaint. Unfortunately, overcrowding is caused by the fact that there are not enough houses for the population, and high rents cause an additional aggravation. Several families occupy a construction suitable for one family and insanitary conditions are increased by the deterioration which such occupation induces. True, the Health Authorities have legal powers to prohibit overcrowding and to condemn houses which have become unfit for human habitation, but in the absence of alternative accommodation, it is no remedy to drive out the occupants from the only shelter available for them.

58. *Labour Conditions.* There was close liaison between officers of the Labour and Health Departments and every assistance was given for the control of sanitary conditions at labour camps and for supervising conditions in factories and workshops.

TABLE XVIII
SANITARY INSPECTORS' YEARLY REPORT 1950

<i>District or Section</i>	<i>Examination of foodstuffs</i>	<i>Samples of foodstuffs submitted for analysis</i>	<i>Inspection of food premises</i>	<i>Inspection of schools</i>	<i>Inspection of offensive trades</i>	<i>Inspection of other premises</i>	<i>Inspection on account of new buildings</i>	<i>Inspection in connection with mosquito control</i>
Port Louis...	... 1,200	38	1,484	94	52	7,338	361	9,111
Pamplemousses ...	80	6	1,019	90	22	6,742	359	4,877
Rivière du Rempart	11	21	330	13	28	4,062	251	2,831
Flacq North	... 216	31	672	17	—	3,687	188	2,995
Flacq South	... 50	2	—	31	—	—	38	675
Mahebourg	... 2,900	42	1,365	33	1	4,219	161	5,363
Rose Belle ...	96	35	1,578	56	—	3,329	32	2,554
Savanine ...	472	44	1,383	64	6	13,788	209	8,373
Curepipe ...	397	35	1,826	49	—	6,487	271	4,333
Vacoas ...	185	67	456	19	—	4,439	344	5,656
Rose Hill ...	208	38	1,388	12	2	6,402	425	7,994
Black River	... 21	15	117	2	—	3,030	67	3,655
Moka ...	104	48	761	4	1	3,375	138	2,351
TOTALS	... 5,940	422	12,379	484	112	66,898	2 844	60,768

TABLE XVIII—continued

SANITARY INSPECTORS' YEARLY REPORT 1950—continued							
Section or District	Inspection in connection with notifiable diseases and contacts	Inspection in connection with Night Soil Service	Inspection in connection with scavenging Service	Disinfections carried out	Number of notices, orders and requests served	Visits to Slaughter Houses	Visits to Markets
Port Louis ...	195	325	300	61	943	4	291
Pamplemousses ...	62	50	180	67	710	64	—
Rivière du Rempart ...	59	365	365	43	1,197	—	—
Flacq North ...	49	223	226	49	567	219	83
Flacq South ...	17	185	198	11	392	—	—
Mahebourg ...	83	1,002	1,136	24	1,206	169	201
Rose Belle ...	12	648	1,576	12	365	49	—
Savanne... ..	16	469	894	15	675	149	—
Curepipe ...	—	233	223	14	1 626	—	53
Vacoas ...	32	2,081	365	17	567	—	365
Rose Hill ...	61	118	365	60	1,970	—	84
Black River ...	138	135	183	22	639	—	—
Moka ...	12	90	165	14	327	—	—
TOTALS ...	736	5,924	6,176	409	11,184	654	1,077

59. *Training of Sanitary Personnel.* 6 students who entered for the course of training in August 1950, were posted during the year under the Medical Officer of Health, Plaines Wilhems.

The course of training is for a period of 18 months.

60. *Port Louis.*—(a) A full account of the administration and of the work done in the capital town of Port Louis was given in last year's departmental report.

The work carried out during 1950 is summarised in Table XIX.

(b) Table XX gives particulars of cases heard by the Magistrate of Port Louis at the instance of the Medical and Health Department.

(c) The following figures show the number of animals slaughtered, examined and condemned during the year under review at the Municipal slaughter house:—

				No of animals slaughtered	No of carcasses examined	Condemned
Madagascar bullock...	...	...		1,849	1,849	8
Rodrigues bullock.....	...	...		408	408	1
Local bullock	...	...	...	209	209	5
Cows (milch breed) ...	..	...		759	759	2
Cows (herd) ...	...	...	...	47	47	3
Heifers (milch breed)	...	...		27	27	—
Heifers (herd)	..	...	...	9	9	—
Calves...	...	...	...	947	947	—
Goats ...	...	...	...	11,700	11,700	1
Sheep	...	...	...	1,058	1,058	—
Pigs ...	...	...	...	3,896	3,896	1

61. *Plaines Wilhems district.* The following is a *résumé* of the report submitted by the Medical Officer of Health.

(i) PUBLIC HEALTH

There was no outbreak of communicable disease during the year and the incidence of enteric fever was the lowest recorded since 1944.

VITAL STATISTICS

(a) MIDYEAR POPULATION

Year	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950
	108,595	109,808	111,206	120,277	122,487	124,319	127,894	131,263	132,124	138,023

(b) DEATHS

	<i>Year</i>	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950
Total	...	2,325	2,576	2,602	2,490	3,134	2,394	1,901	2,524	1,813	1,655
Death rate	...	21.4	23.5	23.4	20.7	25.6	19.3	14.9	19.2	13.7	12

(c) BIRTHS

Total	...	3,869	4,024	3,879	4,928	4,962	5,082	5,638	5,374	5,635	6,236
Birth rate	...	35.6	36.6	34.9	41	40.5	40.9	44.1	40.9	41.9	45.2
Still births	...	279	308	239	285	358	320	314	318	322	359

TABLE XIX

SUMMARY OF SANITARY WORK IN PORT LOUIS DISTRICT DURING THE YEAR 1950

A. INSPECTIONS OF PREMISES

Visits to	Notices (Ord : 47 of 1925)			Orders (Ord : 28/1946)			Requests		
	No. served	No. complied with	No. not complied with	No. served	No. complied with	No. not complied with	No. Served	No. complied with	No. not complied with
Bakeries and pastries ...	126	11	—	—	—	—	—	—	—
Cemeteries and cremation grounds ...	40	—	—	—	—	—	—	—	—
Dairies ...	4	—	—	—	—	—	—	—	—
Factories :—									
(a) Wine ...	99	3	3	1	1	—	—	—	—
(b) Aerated Water ...	30	—	—	—	—	—	—	—	—
(c) Others ...	57	3	3	4	4	—	—	—	—
Hotels and restaurants ...	465	30	28	6	6	—	—	—	—
Markets ...	291	—	—	—	—	—	—	—	—
Private premises ...	7,083	675	607	76	71	5	62	55	7
Shops and stores ...	703	46	46	5	5	—	—	—	—
Schools ...	94	5	4	—	—	—	—	—	—
Slaughter houses ...	4	—	—	—	—	—	—	—	—
Stables and cowsheds ...	115	13	9	3	3	—	—	—	—
Ships ...	100	—	—	—	—	—	—	—	—
TOTAL	9,211	786	711	95	90	5	62	55	7

TABLE XX

Nature of offence	Number of cases				Sentence	
	Total	Fined	Discharged	Summons with- drawn	Total Fines Rs.	Total Im- prison- ment
Selling sophisticated milk ...	60	37	11	1 warrant of arrest not executed	3,025	18 months H.L. in respect of 11 cases convicted
Failing to have the names, sur- names and the kind of milk painted on milk vessels	12	12	—	—	145	—
Failing to produce on demand Registration Certificates—whilst sel- ling milk	3	3	—	—	23	—
Non compliance within delay of Notices re : nuisances as defined in Art. 18 of the Public Health Ordi- nance 47/1925	88	42	1	45	583	—
Preparing foodstuffs without taking adequate measures to prevent infection or contamination	6	5	—	1	35	—
Exposing for sale ready eatable foodstuffs unprotected from dust and flies—G.N. 320/1920	48	45	—	3	555	—
Failing to provide latrines on premises or to maintain the la- trines in good condition—G.N. 183/ 1926	2	2	—	—	10	—
Failing to produce on demand Medical Certificates—whilst selling food commodities—G.N. 153/1926 and 164/1927	17	17	—	—	98	—
Burning charcoal without per- mit—G.N. 198/1907	3	3	—	—	40	—
Non compliance within delay of Order re : mosquito nuisances as defined in Ordinance 28/1946 ...	1	—	—	1	—	—
TOTAL ...	240	166	12	51	4,514	18 months H.L.

(ii) SANITATION

(a) *Night Soil and Conservancy.* A fairly large number of families avail themselves of water closets and septic tank installations ; but the majority of the population makes use of pail and pit latrines. The Curepipe and Vacoas Night Soil is collected by prison labour and the transport effected by the Health Department. The sewage is disposed of at the Sewage Farm in Phoenix.

A small number of pail latrines (72) in Rose Hill is collected by a contractor paid by the Township and disposed of by shallow trenching.

(b) *Collection of Refuse.* In the towns of Curepipe, Quatre Bornes and Rose Hill—Beau Bassin, the scavenging service is performed by the Board of Commissioners ; in the extra-urban areas by the Health Department.

(c) *Water Supply.* The main source of water supply is Mare-aux-Vacoas. The water is filtered and chlorinated at La Marie Water Works.

Wells are used in Camp Fouquereaux and Carreau Galea, rain and crude river water in Bananes, Fressanges and Midlands.

(iii) MARKETS

There are six markets, one in Curepipe, one in Rose Hill, one in Beau Bassin, two in Quatre Bornes and one in Vacoas. The first five are controlled by the Township Boards and the Vacoas Market by the Health Department.

(iv) SLAUGHTER HOUSES

The towns of Curepipe and Rose Hill have an abattoir and the animals and carcasses are examined by a Veterinary Surgeon appointed by the Board.

ANIMALS SLAUGHTERED DURING THE YEAR

	<i>Curepipe</i>		<i>Rose Hill</i>	
Local, Rodrigues and local Oxen ...	...	1,867	...	4,462
Goats ...	...	544	...	1,411
Sheep ...	...	81	...	104
Pigs ...	...	298	...	473

CARCASSES SEIZED

<i>Curepipe</i>		<i>Rose Hill</i>	
<i>Carcasses</i>	<i>Cause of Seizure</i>	<i>Carcasses</i>	<i>Cause of Seizure</i>
7 Madagascar Oxen	Tuberculosis	1 Madagascar Ox	Tuberculosis
1 Madagascar Ox	Emaciation	1 Local Ox	Cachexia
1 Local Ox	Tuberculosis	1 Milch Cow	Emaciation
1 Rodrigues Ox	Tuberculosis	5 Milch Cows	Cachexia
5 Local milch cows	Tuberculosis	1 Milch Cow	Decomposition
1 Sheep	Discoloration of Flesh	1 Sheep	Cachexia
1 Sheep	Tuberculosis	1 Goat	Cachexia
2 Goats	Emaciation	1 Pig	Cysticerci of T. Saginata

TABLE XXI

SUMMARY OF SANITARY WORK IN PLAINES WILHEMS DISTRICT DURING THE YEAR 1950

A.—Inspections of Premises

Visits to	No. of visits	Notices (Ordce. 47 of 1925)				Orders (Ordinance 28 of 1946)				Requests			
		No. Served	No. complied with	No. not complied with		No. Served	No. complied with	No. not complied with		No. Served	No. complied with	No. not complied with	
Bakeries and pastries ...	235	8	8	—		—	—	—		19	19	—	
Cemeteries and cremation grounds ...	113	—	—	—		—	—	—		—	—	—	
Dairies ...	49	—	—	—		—	—	—		—	—	—	
Factories :—													
(a) Wine ...	—	—	—	—		—	—	—		—	—	—	
(b) Aerated Water ...	16	—	—	—		—	—	—		—	—	—	
(c) Others ...	24	—	—	—		—	—	—		—	—	—	
Hotels and restaurants ...	851	4	4	—		—	—	—		12	12	—	
Markets ...	502	—	—	—		—	—	—		—	—	—	
Private premises ...	13,547	1,186	1,004	182		—	—	—		1,231	1,195	36	
Shops and stores ...	1,305	11	11	—		—	—	—		33	33	—	
Schools ...	80	—	—	—		—	—	—		—	—	—	
Slaughter houses ...	—	—	—	—		—	—	—		—	—	—	
Stables and cowsheds ...	2,061	88	58	30		—	—	—		134	123	11	
In connection with mosquito control ...	17,983	12	12	—		902	832	70		487	445	42	
TOTALS	36,766	1,309	1,097	212		902	832	70		1,916	1,827	89	

TABLE XXI—continued

B.—Sanitary Contraventions

Prosecutions under	Number	Fines	Imprisonment
G.N. 72/1920	1	20	
G.N. 42/1934	103	4,860	4 months and 24 weeks with hard labour
G.N. 320/1920	29	315	
Ord. 47/1925	39	379	
G.N. 61/1934	3	110	
G.N. 73 1908	1	50	
G.N. 153/1926	7	48	
G.N. 183/1926	41	403	
Ord. 8/1898	1	200	
Ord. 9/1869	1	10	
G.N. 306/1904	1	40	
Ord. 28/1946	14	1,700	
TOTAL	...	8,135	

C.—Contagious Diseases

Disease	No. of cases notified	No. of disinfections performed
Typhoid fever	43	42
Diphtheria	52	44
Erysipelas	2	2
Polionmyelitis	1	1
Cerebro-spinal meningitis	1	1

D.—Foodstuffs

No. of Examinations	...	790
No. of Seizures	...	73
No. of milk samples taken for analysis	...	133

E. Cremations

No. of cremations supervised	...	113
------------------------------	-----	-----

(v) CEMETERIES

There are four cemeteries in Plaines Wilhems: one in Curepipe belonging to the Township Board, one in Quatre Bornes maintained by the parochial church and the other two in Phoenix and Lower Plaines Wilhems under Government Control.

A summary of the work performed by the Sanitary Staff is shown at Table XXI.

(5) ANTI-RODENT OPERATIONS

62. The branch is composed of a technical assistant, two dissectors of rats, two overseers, seven rat-catchers and twelve labourers. This staff concentrates on the destruction of rats in infested premises and in the harbour area of Port Louis. The rat-proofing of buildings which attract, harbour and nourish rats is attended to by the Sanitary Inspectors of the capital town.

Rattus rattus and *Rattus Norvegicus* are found in the business area of the town, in old houses and commonly in "godowns" and restaurants. *Rattus frugivorus* is found mostly in suburbs and only rarely in the centre of the town, while *Rattus Alexandrinus* is common on sea beaches and in the banks of water courses.

Table XXII shows the number of rats caught and destroyed during the 10-year period 1941-50:—

TABLE XXII

RATS CAUGHT AND DESTROYED DURING PERIOD 1941-50

Year			<i>Norvegicus</i>	<i>Rattus</i>	<i>Frugivorus</i>	<i>Alexandrinus</i>
1941	...	...	1488	19	347	7865
1942	...	...	1422	24	448	8707
1943	...	...	758	21	120	8563
1944	...	...	747	17	50	6870
1945	...	...	849	14	145	7687
1946	...	...	1897	71	187	10730
1947	...	...	2760	54	65	10829
1948	...	...	2028	62	148	14671
1949	...	...	1875	62	365	17286
1950	...	...	1512	42	324	12954

(6) PORT HEALTH WORK AND QUARANTINE

63.—(a) The ports on the Mauritius seaboard are Port Louis and Mahebourg. Ocean-going vessels call at Port Louis which has a marked seasonal trade during and immediately after the sugar crop season.

The Medical Officer of Health, Port Louis is responsible for health measures in the port area in addition to his duties in the town and he is assisted by a Sanitary Inspector.

Table XXIII summaries the work done by the Port Sanitary Authority:—

TABLE XXIII

Vessels arriving	...	...	...	254
Crews examined	...	...	...	12,553
Vessels given pratique on arrival	...			89
Vessels given pratique after disinfection of the linen and effects of the passengers and crew, fumigation and disinfection of the forecastle	...			49
Vessels given pratique after disinfection of linen etc : and claytonization of cargo	...	...	...	61
Vessels arriving from infected ports...				165
Vessels detained for purposes of disinfection and fumigation on account of a "Convention" disease.				0

(b) The airport is at Plaisance in the district of Grand Port. It is under the responsibility of the Medical Officer of the district assisted by a Sanitary Inspector. 89 civil aircraft arrived in the Colony with 2,050 passengers. Of these, 809 coming from infected areas were put under surveillance. Every plane visiting the Colony is disinfected on both arrival and departure.

(c) The quarantine station is at Cannoniers Point in the district of Pamplémousses and is under the supervision of a Steward who resides on the spot. Civil servants are authorised to occupy the first-class bungalows, which are situated in very pleasant surroundings, for periods usually not exceeding fourteen days, and the station is used as a Schools Holiday Camp during the winter season.

The construction of a water carriage system started late in the year and will be a noticeable improvement when completed in 1951.

(7) WATER SUPPLIES

64. The progress made in 1950 has been as follows:—

(a) *Mare-aux-Vacoas-System*

A twin 18" power mains leading raw water from Mare-aux-Vacoas to La Marie were completed.

Two new filters for 800,000 gallons per day were constructed at La Marie Filtration Station.

About 5 miles of the Vacoas to Moka main had been laid by the end of 1950.

(b) *District Water Supplies*

Construction of Piton du Milieu 100MCF Storage Reservoir was continued. The River Diversion Works were approaching completion. Enquiries were sent to Firms in England about the construction of Rapid Gravity Filters for the Piton du Milieu System. 18" pipes for the principal trunk main from the reservoir to Quartier Militaire were received and the work of laying was scheduled to start early in 1951.

The 300,000 gallons and 150,000 gallons service reservoirs at Goodlands and Plaines des Papayes and the trunk main from Nicolière to them were put in operation, resulting in a 20 per cent increase in the volume of supply for these regions of the North of the island. More distributary mains in Pamplémousses, Rivière du Rempart and Flacq districts were laid either with new pipes or existing ones cleaned and relaid.

PART VI

Maternity and Child Welfare

65.—(a) This service is still carried out mainly by the Maternity and Child Welfare Society which has ten centres situated at Curepipe, Rose Hill, Beau Bassin, Vacoas, Henrietta, Quatre Bornes, Centre de Flacq, Rose Belle, Rivière des Anguilles and Mahebourg and by *La Société Pasteur de la Goutte de Lait* administered by the Municipality in Port Louis.

The Maternity and Child Welfare Society receives a grant from Government and its activities in 1950 were as listed below:—

Confinements	2,390
Attendances of women at consultations	2,422
Attendances of infants at consultations.	8,738
Attendances of infants at Centres for weighing and supervision	19,521
Visits to infants	3,111
Average number of infants receiving milk daily	995
Average number of litres of milk distributed daily... ..	521

(b) Supervision of persons practising midwifery is entrusted to the Superintendent of Midwives and her assistant. The post of Superintendent was created in 1946 and that of Assistant Superintendent in 1950. Visits to the midwives in their homes are paid by these two officers and midwives readily appreciate the fact that they can apply to the Superintendent or her assistant for advice and guidance when any difficulty arises.

This work of supervision is indicated by the following figures:—

Number of visits to midwives in their homes	28
Inspections held during the year ...	30
Total visits paid... ..	704

(c) In addition to her supervisory duties, the Superintendent of Midwives held regular ante-natal clinics at Curepipe, Rose Hill, Beau Bassin, Vacoas, Henrietta, Camp Fouquereaux, Quatre Bornes, Rose Belle, Rivière des Anguilles, Flacq, Benarès and Long Mountain. The total number of expectant mothers in attendance was 3,040. An Ante-natal Clinic is also held by the Visiting Matron at Médine (Camp de Masque).

The total number of expectant mothers registered at that Clinic was 39 and the total number of attendances was 69.

The popularity of the antenatal clinic which was established at the Civil Hospital in Port Louis in 1947 has been maintained. The average weekly attendance was 70 in 1950 as compared with 79 in 1949 and 51 in 1948.

(d) During the year under review a district midwifery service based on the Civil Hospital was initiated in Port Louis, the main object being to provide training in the patients' own homes for the pupil midwives who will be sent to the remote districts of the island after qualifying. In addition, the antenatal clinic at Civil Hospital had become so popular that it was no longer possible to deal with all the cases deserving to be delivered in hospital. It is gratifying to note that expectant mothers are becoming more and more health-conscious and they now wish to have better care during their confinements than they used to have in the past. In that respect, the district midwifery service has been of considerable value. It should be pointed out that all cases delivered in the district must previously attend the antenatal clinic at the hospital.

The following figures relate to the Port Louis district service which commenced on 10th July:—

Number of ante natal visits ...	...	67
Number of deliveries ...	...	317
Number of post natal visits ...	...	2,943

(e) 22 qualified midwives are employed by Government, one of whom is stationed at Rodrigues. They made 6,774 visits and attended 2,941 confinements.

(f) There were 17 pupil midwives in training at Victoria and Civil Hospitals on the 31st December. 5 qualified during the year.

PART VII

Prisons

66.—(a) *Population*. The total number of prisoners admitted during the year was 1,645 and the daily average of population was 345.9.

(b) *Morbidity*. The following figures indicate the morbidity over the 5 year period 1946–1950:—

	1946	1947	1948	1949	1950
In patients ...	946	768	664	555	433
In patients daily average...	31.82	26.98	24.7	27.9	23.04
Out patients new cases ...	2,616	2,926	2,725	6,209	7,018
Out patients daily average new cases ...	7.17	8.2	7.5	15.9	19.2
Deaths ...	14	10	5	1	1
Daily average in Prison ...	568	575.5	621	498	466.7

(c) *Health*. The health conditions of prisoners improved steadily as from 1949. The incidence of malaria has fallen from 264 cases in 1946 to 8 in 1950. Two cases of pulmonary tuberculosis were recorded during the year, but there were no other cases of notifiable diseases. Only one death caused by heart failure occurred.

(d) *Diet.* From 4th February, 1949, maize was replaced by bread ; on 27th June, 1949, a new diet scale including two bananas daily and five rice meals weekly was introduced ; as from 1st February, 1950, tea with milk was given to all the inmates.

It is worthy to note that avitaminosis receded on the suppression of maize from the dietary and has practically disappeared with the introduction of the present scale of diet.

PART VIII

Welfare of the Blind

67. A Survey of all Blind Persons in the Colony has been started, the object being to obtain reliable information as to the incidence of blindness and the causes thereof.

Associated with this, is a scheme to enable the early detection of cases of eye diseases which may ultimately lead to blindness, these cases being at once referred to the eye specialist for expert treatment. To this end, instructions have been issued to Medical officers in charge of hospitals and dispensaries to keep a Register of Eye Cases for all patients suffering from eye defects whether or not it is on account of such defects that the patients seek advice.

At this Department's request, the Director of Education has instructed school teachers to refer children suffering from defects of the eye to the Government Medical Officer of the locality, by arrangement.

For the time being, the Director of Medical Services acts in the capacity of Registrar of the Blind.

PART IX

The Dependency of Rodrigues

68. The Medical Officer reports as follows:—

MEDICAL SERVICES RODRIGUES

(i)—*Staff.* The staff consists of:—

- (a) One Medical Officer stationed at Port Mathurin.
- (b) One dresser stationed at Port Mathurin.
- (c) One dresser stationed at Mt. Lubin Hospital.
- (d) One dresser stationed at La Ferme Hospital.
- (e) One Midwife stationed at Port Mathurin.
- (f) Three male hospital servants one at each hospital.
- (g) Two female servants at Port Mathurin Hospital.
- (h) Five Scavengers.

The following posts provided in the Estimates 1950-1951 are still vacant:—

- (a) Three dressers.
- (b) Two midwives.
- (c) One Sanitary Inspectors.

(ii) Dr. Rankine, Director of Medical Services, paid a visit to Port Mathurin and La Ferme Hospitals at the beginning of July, 1950.

(iii) *Staff Movements* :—

Transfer—Dr. D'Avoine left Rodrigues on the 4th April, 1950, at the completion of his tour of duty.

Appointment—Dr. Ph. Bouton was appointed G.M.O. Rodrigues on the 4th April, 1950.

Dresser Dasan of Mt. Lubin Hospital left for Mauritius on the 4th March, 1950, and was relieved by Dresser Lamberty.

Midwife Duval took charge of Port Mathurin Maternity on the 14th November, 1950.

Midwife Legrand left for Mauritius on 18th December, 1950.

(iv) *Prevailing diseases*. The prevailing diseases were Amoebiasis, gastro-enteritis, influenza, worms, venereal diseases and anaemia.

No cases of poliomyelitis were seen this year.

Four infectious cases of leprosy were transferred to Mauritius and there are seven under treatment at the three hospitals.

(v) *Port Mathurin Hospital* :—

(a) Dispensary attendances 5,950. This is more by 1,341 than last year's figure.

(b) 368 patients were admitted to hospital. Of these 130 provided their own food.

(c) Deaths in hospital: 13 patients died in hospital from the following causes: Pulmonary Tuberculosis, 1; Typhoid fever, 1; Carcinoma of prostate, 1; Bacillary Dysentery, 1; Cerebral Haemorrhage, 1; Myocarditis, 2; Senility, 2; Prematurity, 2; Asphyxia Livida, 1 and Meningitis, 1.

(d) No. of operations: 130; Abdominal, 7; Curettage, 12; Haemorrhoids, 7; Tonsillectomies, 8; Amputations, 2; Minor, 94; Dental Extractions, 308.

(e) Vaccinations: 159 of which three were unsuccessful.

(f) Leper patients attending for treatment 2.

(vi) *Port Mathurin Maternity and Antenatal Clinics*. 294 cases including 68 primiparas were seen antenatally at the three hospitals. Consultations were held once every fortnight at La Ferme and Mt. Lubin and three times a week in Port Mathurin.

58 confinements including 18 primiparous were attended to by the mid-wife in Port Mathurin.

Still-births, 3 ; Premature births, 4 ; Full time, 51. Difficult labours and instrumental deliveries, 4.

(vii) *La Ferme Hospital*:—

(a) Dispensary attendances 10,008 showing an increase of 4,703 on last year's figures.

(b) 66 patients were admitted to hospital. Of these, 45 received hospital diet.

(c) Death in hospital, 1.

(d) Minor operations 61. Dental extractions 285.

(e) Vaccinations 135 of which 9 were unsuccessful.

(viii) *Mt. Lubin Hospital*:—

(a) Dispensary attendances 12,305.

(b) 136 patients were treated indoor. Of these 80 received hospital diet.

(c) Deaths in hospital 3 from the following causes:—

(1) Tetanus neonatorum.

(2) Marasmus

(3) Carcinoma of stomach.

(d) Minor surgical operations 124. Dental extractions 332.

(e) Vaccinations 180 ; of these five were unsuccessful.

(ix) *Patients sent to Mauritius at Government expense.*

16 patients were sent to Mauritius for treatment for the following:—

(a) Osteomyelitis 1 case

(b) Rodent ulcer 1 „

(c) Tumour of jaw 1 „

(d) Carcinoma of breast 1 „

(e) Carcinoma of uterus 1 „

(f) Diseases of the eye 3 „

(g) Mental cases 4 „

(h) Leprosy 4 „

(x) *Port Sanitation.* Free pratique was given to every ship that came.

(xi) *Exhumation.* One body was exhumated and taken to Mauritius for burial.

(xii) *Post Mortem.* One autopsy was carried out on a murder case.

CONCLUSION

69. I should like to conclude this report by recording the debt owed by the Colony to the retiring Head of the Department for the outstanding part played by him in the improvement in health conditions which are apparent in this report. Dr. Adam Rankine, C.B.E., M.C., Director of Medical Services, assumed duty on the 27th January, 1943, and left Mauritius on the 25th March, 1951, on leave prior to retirement. He could not write this report before his departure, since a good deal of the information which appears therein had just been made available from outstations and the figures had to be sifted by the Statistical Division of the Department. As his Deputy, it has been my privilege to put all the facts together and I hope I have succeeded in showing what this Colony owes to him.

In his name and in my own name, I thank all the officers of the Department for their loyal and active co-operation throughout the year.

4th September, 1951.

R. LAVOPIERRE,
Acting Director of Medical Services.

APPENDIX I

Annual Report of the Bacteriological Laboratory for the year 1950

STAFF

Senior Pathologist	: A. Ng Chhung Hin, M.B. B.Ch., B.A.O. (N.U.I.) D.C.P. (London). D.T.M. and H. (England).
Pathologist	: S. G. Cowper, Ph.D (London), B.Sc. (Reading) M.R.C.S. (England), L.R.C.P. (London). D.T.M. and H. (Liverpool).
Government Chemist	: W. Diaper, B.Sc. Tech. (Manc.), A.M.C.T.
Assistant Government Chemist	: R. Rivalland, R.A.C. (Mauritius).
Senior Laboratory Assistant (Pathology)	: L. Webb.
Laboratory Assistant (Bio-Chemistry)	: J. E. Hervel.
Junior Laboratory Assistant (Pathology)	: K. Topsy, B. Sc. (London).
„	Miss A. de Gersigny.
„	Miss L. Webb.
„	Miss M. Fleuriot.
„	Miss L. Guillot.
„	H. Duval.
„	F. Louise.
„	A. Bouvet.
„	G. Issany.
„	R. Chan Pat Young.
Microscopist	: L. Dorval.
Clerk	: L. F. Legrigore.

Dr. S. G. Cowper, Pathologist, arrived in the Colony on the 13th November of this year on first appointment.

Mr. W. Diaper, Government Chemist, resigned on the 18th August.

Mr. R. Rivalland, Scientific Assistant, Department of Agriculture, was appointed Assistant Government Chemist on the 16th of May and, subsequent upon the departure of the Government Chemist, acted as such.

Mr. L. J. Dorval, Microscopist Grade I (Malaria and Hookworm branch) was transferred to the Central Laboratory on 16th January, 1950, and acted as Assistant Government Chemist from 18th August to 31st October, 1950.

Mr. J. E. Herval, Junior Laboratory Assistant, was promoted to the newly created post of Laboratory Assistant Bio-Chemistry in July 1950 while on study leave in the United Kingdom. He returned to Mauritius on 28th October, 1950, and assumed the duties of Acting Assistant Government Chemist, releasing Mr. Dorval for the bacteriological division.

Mr. H. Duval, Microscopist Grade II, (Malaria and Hookworm Branch) was transferred to the Central Laboratory and subsequently nominated as Junior Laboratory Assistant.

Misses Fleuriot, Guillot and Mr. Louise, temporary laboratory assistants, were appointed Junior Laboratory Assistants in July.

In December, three new junior laboratory assistants were appointed.

Helminthology. 572 egg counts by the Clayton Lane's method were carried out at the Central Laboratory from suspected cases of ankylostomiasis. Of these 10.3 per cent could be classed as cases of severe hookworm infection. Specimens were received mainly from the following districts: Grand Port, Savane and Flacq. As far as we can see infected cases are scattered in different parts of the districts.

Bacteriology. For the isolation of *Corynebact. diphtheriae*, Blood Tellurite medium is now being used and colonies giving cultural and morphological characteristics of the organisms are subcultured in Hiss serum sugar media as a routine. This procedure, in addition to allowing a more accurate identification of the organism, also type it.

The number of examinations done at the Central Laboratory and its branches amounted to 50,234. Of these, 33,249 were done at the Central Laboratory (Bacteriological division: 26,093, Chemical division: 7,156), 11,975 at the Civil Hospital Branch Laboratory and 5,010 at the Victoria Branch Laboratory. These figures show that work is still increasing.

LABORATORY RECEIPTS IN THE FORM OF FEES

The total earnings for the year amounted to Rs. 17,772.14.

ROUTINE EXAMINATIONS

A total of 26,093 examinations, exclusive of those made by the Chemical Division (Annexure I) and of the Branch Laboratories (Annexures II and III), were carried out by the Bacteriological Division of the Central Laboratory.

The work of the Laboratory is divided up into the following sections:—

- I. Medical Biology.
- II. Pathology.
- III. Bacteriology.
- IV. Haematology.
- V. Serology.
- VI. Veterinary.
- VII. Laboratory Products.

I. MEDICAL BIOLOGY

A. 4,969 SIMPLE ROUTINE EXAMINATIONS WERE MADE

(a) *Blood (Microscopical)*

Films for malaria :—

<i>Plasmodium vivax</i> ...	...	...	...	...	...	...	4
<i>Plasmodium falciparum</i> ...	...	...	...	...	...	...	3
Undetermined rings ...	...	...	...	...	...	...	3
No parasites found ...	...	...	...	...	...	...	378

Films for microfilariæ :—

<i>Wuchereria bancrofti</i> ...	...	...	...	...	...	...	21
No microfilariæ ...	...	...	...	...	...	...	153

(b) *Fæces (Microscopical)*

Total number examined ...	...	...	...	...	...	...	2,730
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Helminths :—

<i>Taenia saginata</i> ...	...	...	...	...	...	...	6
<i>Trichuris ova</i> ...	...	...	...	...	...	...	1,140
<i>Ascaris ova</i> ...	...	...	...	...	...	...	368
" Hookworm " ova ...	...	...	...	...	...	...	1,027
<i>Strongyloides larvae</i> ...	...	...	...	...	...	...	81
<i>Trichostrongyle ova</i> ...	...	...	...	...	...	...	4
<i>Heterodera marioni ova</i> ...	...	...	...	...	...	...	5
<i>Enterobius vermicularis ova</i> ...	...	...	...	...	...	...	8

Protozoa :—

<i>Entamoeba histolytica</i> ...	...	...	...	...	...	...	75
<i>Entamoeba coli</i> ...	...	...	...	...	...	...	186
Vegetative and precystic ...	...	...	...	...	...	...	126
<i>Iodamoeba butschlii</i> ...	...	...	...	...	...	...	1
<i>Endolimax nana</i> ...	...	...	...	...	...	...	92
<i>Giardia intestinalis</i> ...	...	...	...	—	...	...	117
<i>Chilomastix mesnili</i> ...	...	...	...	...	...	...	15
<i>Trichomonas intestinalis</i> ...	...	...	...	...	...	...	67
<i>Blastocystis hominis</i> ...	...	...	...	...	...	...	634
No helminths or protozoa ...	...	...	...	...	...	...	581

(c) *Urine (Microscopical)*

Total number examined ...	...	...	...	...	...	...	1,373
Hyaline casts... ..	...	...	...	...	...	...	126
Granular casts ...	...	...	...	...	...	...	134
Waxy casts ...	...	...	...	...	...	...	12
Leucocytic casts ...	...	...	...	...	...	...	31
Cellular casts... ..	...	...	...	...	...	...	18
<i>Schistosoma haematobium</i> ...	...	...	...	...	...	...	102
<i>Trichomonas vaginalis</i> ...	...	...	...	...	...	...	13
Microfilariæ ...	...	...	...	...	...	...	2

(d) *Urine (Pregnancy test)*

Total number examined ...	...	...	...	...	...	...	220
Positive—Male toad test ...	...	...	...	...	...	...	94
Positive—Friedman's test ...	...	...	...	...	...	...	1

(e) *Cerebro-spinal*

Total number examined ...	...	...	...	...	...	...	66
Leucocyte count ...	...	...	...	...	...	...	49
Differential leucocyte count ...	...	...	...	...	...	...	14
Nonne Apelt test ...	...	...	...	...	...	...	3

(f) *Throat Swabbings*

<i>Monilia albicans</i> ...	...	...	...	...	...	...	14
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(g) *Fus, Discharges and Scrapings (Microscopical)*

Total number examined ...	...	...	...	...	...	...	4
Fungus ...	...	...	...	...	...	...	4

II. PATHOLOGY

Morbid histological examinations were made on, 183 specimens of material.

HEAD AND NECK :—

<i>Brain</i> : Normal	...	...	...	...	...	...	...	1
Congestion...	...	...	...	...	...	...	...	1
<i>Orbit</i> : Round celled sarcoma	...	...	...	...	...	...	...	1
<i>Gum</i> : Epulis	...	...	...	...	...	...	...	1
Gingivitis	...	...	...	...	...	...	...	2
<i>Tooth</i> : Dentigerous cyst	...	...	...	...	...	...	...	1
<i>Tongue</i> : Epithelioma	...	...	...	...	...	...	...	2
<i>Face</i> : Epithelioma	...	...	...	...	...	...	...	2
<i>Thyroid</i> : Colloid goitre	...	...	...	...	...	...	...	2
Caseous gland	...	...	...	...	...	...	...	1
<i>Pharynx</i> : Tubercle bacilli	...	...	...	...	...	...	...	1
<i>Neck</i> : Epithelioma	...	...	...	...	...	...	...	1
<i>Salivary gland</i> : Inflammatory fibrosis	...	...	...	...	...	...	...	1

CHEST :—

<i>Breast</i> : Skin — Inflammatory ulcer	...	...	...	...	...	...	...	1
Chronic mastitis	...	...	...	...	...	...	...	4
Fibroadenoma	...	...	...	...	...	...	...	7
Carcinoma	...	...	...	...	...	...	...	8

LUNG :—

Normal foetal	...	...	...	...	...	...	...	1
Putrefied foetal	...	...	...	...	...	...	...	1
Tubercle bacilli	...	...	...	...	...	...	...	1
Normal adult	...	...	...	...	...	...	...	1
Congestion	...	...	...	...	...	...	...	1
Necrotic material coughed up	...	...	...	...	...	...	...	1

ABDOMEN :—

<i>Abdominal wall</i> : Epithelioma	...	...	...	...	...	...	...	1
<i>Stomach</i> : Scirrhus Carcinoma	...	...	...	...	...	...	...	3
Adenocarcinoma...	...	...	...	...	...	...	...	10
Non-malignant pyloric stenosis	...	...	...	...	...	...	...	1
Gastritis	...	...	...	...	...	...	...	1
<i>Rectum</i> : Epithelioma	...	...	...	...	...	...	...	1
<i>Caecum</i> : Adenocarcinoma...	...	...	...	...	...	...	...	1
<i>Anus</i> : Papilloma	...	...	...	...	...	...	...	1
Simple ulcer	...	...	...	...	...	...	...	1
Epithelioma...	...	...	...	...	...	...	...	1
Simple hypertrophy of epithelium	...	...	...	...	...	...	...	1
<i>Appendix</i> : Chronic appendicitis	...	...	...	...	...	...	...	1
Bilharzial appendicitis	...	...	...	...	...	...	...	1
<i>Kidney</i> : Cloudy swelling	...	...	...	...	...	...	...	3
Chronic nephritis	...	...	...	...	...	...	...	1
<i>Pancreas</i> : Acute pancreatitis	...	...	...	...	...	...	...	2
<i>Liver</i> : Acute necrosis	...	...	...	...	...	...	...	2
Normal	...	...	...	...	...	...	...	1
Congestion	...	...	...	...	...	...	...	2
Unilobular cirrhosis	...	...	...	...	...	...	...	1
<i>Spleen</i> : Congestion...	...	...	...	...	...	...	...	1
Perisplenitis	...	...	...	...	...	...	...	2
Amyloid degeneration	...	...	...	...	...	...	...	1
<i>Suprarenal</i> : Normal	...	...	...	...	...	...	...	1
<i>Intestine</i> : Intussuseplion	...	...	...	...	...	...	...	1

PELVIS

<i>Urinary bladder</i> : Transitional carcinoma	...	...	...	...	...	...	...	1
Schistosomum haematobium	...	...	...	...	...	...	...	1

II PATHOLOGY—continued

GENITAL ORGANS

Male :—

<i>Testes</i> : Undescended	...	...	...	...	...	...	1
<i>Testicle</i> : Simple orchitis	...	...	...	...	...	...	1
Tubercle bacilli	...	...	...	...	...	...	1
<i>Prostate</i> : Hypertrophy	...	...	...	...	...	...	4
Adenocarcinoma	...	...	...	...	...	...	1
<i>Scrotum</i> : Calcified nodules	...	...	...	...	...	...	1
<i>Penis</i> : Epithelioma	...	...	...	...	...	...	1

Female :—

<i>Cervix</i> : Chronic cervicitis	...	...	...	...	...	...	3
Squamous carcinoma	...	...	...	...	...	...	5
<i>Uterus</i> : Mixed-celled sarcoma	...	...	...	...	...	...	1
Hydatidiform mole	...	...	...	...	...	...	1
Adenocarcinoma	...	...	...	...	...	...	4
Adenomyoma	...	...	...	...	...	...	1
Acute endometritis	...	...	...	...	...	...	2
Normal curettings...	...	...	...	...	...	...	1
<i>Vagina</i> : Epithelioma	...	...	...	...	...	...	1
<i>Ovary</i> : Ruptured ectopic...	...	...	...	...	...	...	1
Adenocarcinoma	...	...	...	...	...	...	1
Papillary Cystadenoma	...	...	...	...	...	...	1
Fibroma	...	...	...	...	...	...	1
<i>Fallopian tube</i> : Bilharzial...	...	...	...	...	...	...	1

UPPER LIMB :

<i>Hand</i> : Simple ganglion	...	...	...	...	...	...	1
Molluscum contagiosum	...	...	...	...	...	...	1

LOWER LIMB :

Fibrosarcoma	...	...	...	...	...	...	2
<i>Hip</i> : Tubercle bacilli	...	...	...	...	...	...	1
<i>Knee joint</i> : Synovitis	...	...	...	...	...	...	1
Fibrous ankylosis	...	...	...	...	...	...	1
Synovioma	...	...	...	...	...	...	1
<i>Foot</i> : Cartilage from congenital deformity	...	...	...	...	...	...	1
<i>Lymph glands</i> : Chronic adenitis	...	...	...	...	...	...	4
Tubercle bacilli	...	...	...	...	...	...	5
Lymphosarcoma	...	...	...	...	...	...	7
Secondary carcinoma	...	...	...	...	...	...	3
<i>Blood Vessels</i> : Aneurysm	...	...	...	...	...	...	1
Endarteritis obliterans	...	...	...	...	...	...	5
Artériosclerosis	...	...	...	...	...	...	1
<i>Vertebral column</i> : Prolapsed disc	...	...	...	...	...	...	2
<i>Shin and subcutaneous tissue</i> : Pilonidal cyst	...	...	...	...	...	...	1
Rodent ulcer	...	...	...	...	...	...	1
Epithelioma	...	...	...	...	...	...	1
Papilloma	...	...	...	...	...	...	1
Chronic inflammation...	...	...	...	...	...	...	3
Fibroma...	...	...	...	...	...	...	1
Hyper keratinisation of epithelium	...	...	...	...	...	...	2
Boeck's sarcoid	...	...	...	...	...	...	1
Spindle celled sarcoma	...	...	...	...	...	...	1
<i>Bone</i> : Normal	...	...	...	...	...	...	1
Osteitis fibrosa (focal type)	...	...	...	...	...	...	2
Exostosis	...	...	...	...	...	...	1
Chronic osteomyelitis	...	...	...	...	...	...	3
Giant celled sarcoma	...	...	...	...	...	...	1
Fibrosarcoma	...	...	...	...	...	...	1
<i>Nerve</i> : Neuroma	...	...	...	...	...	...	3
Neuritis	...	...	...	...	...	...	2
<i>Miscellaneous</i> : Lipoma	...	...	...	...	...	...	1
<i>Sheep's Kidney</i> : Chronic nephritis	...	...	...	...	...	...	1

III. BACTERIOLOGICAL

A. 1,085 MICROSCOPICAL EXAMINATIONS WERE MADE

(a) *Sputum* (Microscopical)

Total number examined	...	...	...	...	...	...	776
<i>Mycobacter tuberculosis</i>	...	...	...	...	...	...	115

(b) *Faeces* (Microscopical)

Total number examined	...	...	...	...	...	...	2
<i>Mycobacter. tuberculosis</i>	...	...	...	...	...	...	

(c) *Urine* (Microscopical)

Total number examined	...	...	...	...	...	...	4
<i>Mycobacter tuberculosis</i>	...	...	...	...	...	...	1

(d) *Cerebro-spinal Fluid* (Microscopical)

Total number examined	...	...	...	...	...	...	0
<i>Mycobacter tuberculosis</i>	...	...	...	...	...	...	1
Pneumococci...	...	...	...	...	...	...	1

(e) *Throat and Nasal Swabbings* (Microscopical)

Total number examined	...	...	...	...	...	...	60
<i>Corynebact. diphtheriae</i>	...	...	...	...	...	...	7

(f) *Pus, Discharges and Scrapings, etc.* (Microscopical)

Total number examined	...	...	...	...	...	...	231
<i>Neisseria gonorrhoeae</i>	...	...	...	...	...	...	10
<i>Mycobacter tuberculosis</i>	...	...	...	...	...	...	6
Diphtheroids ...	...	...	...	...	...	...	1
Vincent fusiform organisms	...	...	...	...	...	...	3
Streptococci ...	...	...	...	...	...	...	10

B. 2,975 CULTURAL EXAMINATIONS WERE MADE

(a) *Blood*

Total number cultured	...	...	...	...	...	...	63
Coliform organisms	...	...	...	...	...	...	12
<i>Pseudomonas pyocyanea</i>	...	...	...	...	...	...	1
Staphylococci	...	...	...	...	...	...	5
Streptococci ...	...	...	...	...	...	...	3
Inoculation to guinea pig for <i>Leptospira icterohaemorrhagica</i>							2

(b) *Faeces*

<i>Bact. typhosum</i>	...	...	...	...	...	...	2
Total number examined	...	...	...	...	...	...	60

(c) *Urine*

Total number cultured	...	...	...	...	...	...	596
Coliform organisms	...	...	...	...	...	...	307
<i>Bact. alkaligenes</i>	...	...	...	...	...	...	13
<i>Bact. proteus</i> ...	...	...	...	...	...	...	15
<i>Pseudomonas pyocyanea</i>	...	...	...	...	...	...	21
Diphtheroids ...	...	...	...	...	...	...	4
Streptococci ...	...	...	...	...	...	...	39
Staphylococci	...	...	...	...	...	...	24
Inoculation to guinea pig for <i>Leptospira icterohaemorrhagica</i>							2
do. <i>Mycobacter, tuberculosis</i>						...	3

(d) *Sputum*

Total number cultured	...	...	...	...	...	...	8
<i>Bact. friedlanderii</i>	...	...	...	...	...	...	3
Pneumococci...	...	...	...	...	...	...	4
Streptococci ...	...	...	...	...	...	...	3
Staphylococci	...	...	...	...	...	...	4

III BACTERIOLOGICAL—continued

(e) *Cerebro-spinal Fluid*

Total number cultured	...	...	...	...	...	...	72
Coliform organisms...	...	...	...	...	...	...	11
<i>Bact. proteus</i> ...	...	...	...	...	...	...	1
Pneumococci...	...	...	...	...	...	...	8
Inoculation to guinea pig for <i>mycobacter, tuberculosis</i>	...	...	...	...	...	...	3

(f) *Throat and Nasal Swabbings*

Total number cultured	...	...	...	...	...	...	1,514
<i>Corynebact, diphtheriae</i>	...	...	...	...	...	...	283
<i>Pseudomonas pyocyanea</i>	...	...	...	...	...	...	1
Diphtheroids	...	...	...	...	...	...	97
Pneumococci	...	...	...	...	...	...	1
Streptococci	...	...	...	...	...	...	76
Staphylococci	...	...	...	...	...	...	65
Virulence test for <i>corynebact, diphtheriae</i>	...	...	...	...	...	...	15

(g) *Pus, Discharges and Scrapings, etc.*

Total number cultured	...	...	...	...	...	...	657
<i>Corynebact diphtheriae</i>	...	...	...	...	...	...	3
Coliform organisms...	...	...	...	...	...	...	41
<i>B. atkaligenes</i>	...	...	...	...	...	...	5
<i>Bact. frielanderi</i>	...	...	...	...	...	...	5
<i>Bact. proteus</i> ...	...	...	...	...	...	...	4
<i>Pseudomonas pyocyanea</i>	...	...	...	...	...	...	6
Pneumococci...	...	...	...	...	...	...	2
Staphylococci	...	...	...	...	...	...	357
Streptococci	...	...	...	...	...	...	24
Inoculation to guinea pig for <i>mycobacter tuberculosis</i>	...	...	...	...	...	...	13

(h) *Industry*

Total number cultured	...	...	...	...	...	...	5
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C. AUTOGENOUS VACCINES PREPARED FROM THE FOLLOWING
ORGANISMS ISOLATED, AMONG OTHERS,
FROM VARIOUS SAMPLES, 42 IN ALL.(a) *Urine*

Coliform organisms...	...	...	...	...	...	...	4
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(b) *Sputum*

Streptococci	...	...	...	...	...	...	2
Staphylococci	...	...	...	...	...	...	2

(c) *Throat and Nasal Swabbings*

Streptococci	...	...	...	...	...	...	6
Staphylococci	...	...	...	...	...	...	3

(d) *Pus, Discharges and Scrapings, etc.*

Staphylococci	...	...	...	...	...	...	25
Streptococci	...	...	...	...	...	...	2

D. AGGLUTINATION TESTS

Significant agglutinins for <i>Bact. typhosum</i> , "H" antigen	...	...	...	...	...	475
" " " " "O" "	...	...	...	...	...	364
" " <i>Proteus</i> OX 19	...	...	...	...	...	6
" " <i>Proteus</i> OX 2	...	...	...	...	...	1
" " <i>Brucella abortus</i>	...	...	...	...	...	1
Unsuitable for test	...	...	...	...	...	9
Total number of sera submitted for agglutination test	...	...	...	...	...	1086

E. **Water analysis** :—

Number of samples examined	...	...	...	...	361
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F. **Septic tank** :—

Number of samples examined	...	...	...	...	2
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G. **Milk analysis** :—

Number of samples examined	...	...	...	...	6
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IV. HAEMATOLOGY

ROUTINE BLOOD EXAMINATIONS.

Full counts of red and white cells and haemoglobin determinations	582
Differential leucocyte counts	563
Blood picture... ..	1
Blood typing	492
Clotting and bleeding times	18
Sedimentation rate	268
Blood platelets	5
Reticulocytes counts... ..	4
Total number examined	1933

V. SEROLOGY

(a) *Blood*

Kahn test :

Negative	9,186
Doubtful reactions	461
+	696
+ ÷	1,084
+ + + ...	667
+ + ÷ ÷	50
Unsuitable for test	377
TOTAL	12,521

(b) *Cerebro-spinal fluid*

Negative	27
Doubtful reaction	1
+	4
+ + ...	4
Unsuitable for test	4
TOTAL	40

(c) *Blood*

Paul Bunnell test	1
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VI. VETERINARY

A. MEDICAL-BIOLOGY

(a) *Blood (Microscopical)*

Total number examined	24
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(b) *Faeces (Microscopical)*

Total number examined	2
<i>Haemonchus contortus</i>	1

(c) *Foetusses, Discharges, Scrapings etc. (Microscopical)*

Total number examined	10
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B. BACTERIOLOGICAL

(a) *Foetusses and Discharges*

Total number cultured	14
<i>Brucella abortus</i>	2
Viability test on S.F. 19 <i>Brucella abortus</i> (Weighbridge) ...	1

C. AGGLUTINATION TESTS

Significant agglutinins for <i>Brucella abortus</i>	172
Total number of sera submitted for agglutination test ...	303

VII. LABORATORY PRODUCTS

Autogenous vaccines were prepared during the year 1950 ; details of which will be found under the bacteriological section.

T.A.B. vaccine prophylaxis	...	...	...	...	11 litres
T.A.B. vaccine protein shock	...	...	...	...	200 c.c.
Besredkha's staphylococcal antiviral	...	...	...	...	4 litres

A strain of *lactobacillus bulgaris* was maintained.

CONCLUSION

I would like to tender my warmest thanks to the members of the staff of the Central Laboratory and its branches for their devotion to duty and their loyal co-operation throughout the year.

18th February, 1951.

A. NG CHHUNG HIN,
Senior Pathologist.

ANNEXURE I

Annual Report of the Government Chemist for the year 1950

STAFF

Government Chemist	...	...	W. Diaper, B.Sc. Tech. (Manc.), A.M.C.T.
Assistant Government Chemist			R. Rivalland, R.A.C. (Mauritius).
Laboratory Assistant	...	...	E. Herval.
(Bio-Chemistry)			

Mr. W. Diaper, Government Chemist, resigned and left the Colony in August 1950.

Mr. R. Rivalland, Scientific Assistant, Department of Agriculture, was appointed Assistant Government Chemist in May and afterwards acted as Government Chemist.

Mr. E. Herval, was appointed to the newly created post of Laboratory Assistant, Bio-Chemistry, as from the 1st of July, 1950. On his return from overseas leave, he was appointed to act as Assistant Government Chemist.

Mr. L. Dorval, Microscopist Grade I, acted as Assistant Government Chemist during period August—October 1950.

The total number of samples and exhibits received during the year was 4,503 and 7,156 determinations were done.

The work was divided as follows:—

- (1) *Bio-Chemical*. comprising Blood, Urine, Faeces, etc., 3,018 samples were received and 3,904 determinations done.

- (2) *Public Health*. comprising Milk, Water, Foodstuffs, etc., 659 samples were received and 1,966 determinations done.
- (3) *Customs and Excise*. comprising Rum, Power Alcohol, Tissue, etc., 348 samples were received and 352 determinations done.
- (4) *Forensic*. comprising Medico legal (cases of poisoning), drugs (as opium, gandia) and Revenue offences (as illicit rum), etc.
- (5) *Miscellaneous*. comprising Chinese drugs, Coal tar, Motor spirit, Crackers, etc., 273 samples were received and 449 determinations done.

As regards to (1) I may point out that the laboratory has benefited of the stay of Mr. Hervel for a refresher course in London and that the work in this branch is now improving. New methods requiring electric apparatuses will be started as soon as this laboratory will be equipped for same.

(2) 463 samples of milk were received during the year ; of these 75 per cent were found adulterated. The highest figure for added water and fat deficiency recorded were 54 per cent and 76 per cent, respectively.

Analyses of waters for drinking purposes from La Marie, Pailles and Monneron were carried out monthly ; results were found satisfactory.

Edible oils received from abroad were checked for the presence of mineral oil and tricresyl phosphate. All samples were found free from these substances.

(3) 165 samples of rum from the Warehouse were analysed and found free from furfuraldehyde.

(4) The number of exhibits received here for the detection of opium and gandia in police cases shows that the number of people addicted to these dangerous drugs is increasing alarmingly.

A decrease in illicit rum is to be recorded during the year.

(5) Several types of Chinese drugs were examined and found to comply with the Dangerous Drugs Ordinance.

Chinese crackers were also analysed and no dangerous explosives which could endanger persons using them were detected.

Research work could not be carried out due to shortage of staff and to lack of modern equipment. Research will start as soon a Government Chemist is appointed and meanwhile the laboratory is being modernised.

The Acting Government Chemist has been appointed member of the Liquor Licensing Board during the year and has supervised the work of the examining Officer at the Customs Department.

19th February, 1951.

R. RIVALLAND,
Acting Government Chemist,

ANNEXURE II

Annual Report of Civil Hospital Branch Laboratory
for the Year 1950

Total number of examinations : 11,975

I. MEDICAL BIOLOGY

5,952 SIMPLE ROUTINE CLINICAL EXAMINATIONS WERE MADE

(a) *Blood, (Microscopical)*

Total number examined	...	...	...	...	...	...	335
Films for malaria :—							
Undetermined rings...	...	...	...	...	...	...	1
No parasites found	...	...	...	...	...	...	176
Films for microfilaria :—							
Wuchereria bancrofti	...	...	...	...	...	...	28
No microfilariae	...	...	...	...	...	...	130

(b) *Faeces. (Microscopical)*

Total number examined	...	...	...	...	...	...	2,825
Helminths :—							
Trichuris ova	...	...	...	...	...	...	612
Ascaris ova	...	...	...	...	...	...	325
' Hookworm ' ova	...	...	...	...	...	...	865
<i>Heterodera marioni</i> ova	...	...	...	...	...	...	2
<i>Trichostrongyle</i> ova	...	...	...	...	...	...	22
<i>Oxyuris vermicularis</i> ova	...	...	...	...	...	...	6
<i>Strongyloides larvae</i> ...	...	...	...	...	...	...	84
<i>Clonorchis sinensis</i> ova	...	...	...	...	...	...	1
Protozoa :—							
<i>Entamoebae histolytica</i>	...	...	...	...	...	...	38
<i>Entamoebae coli</i>	...	...	...	...	...	...	213
Vegetative and precystic entamoebae	...	...	...	...	...	...	54
<i>Eudotimax nana</i>	...	...	...	...	...	...	112
<i>Giardia intestinalis</i>	...	...	...	...	...	...	83
<i>Chilomastix mesnili</i>	...	...	...	...	...	...	28
<i>Trichomonas intestinalis</i>	...	...	...	...	...	...	75
<i>Blastocystis hominis</i>	...	...	...	...	...	...	329
No helminths or ova	...	...	...	...	...	...	1,047

(c) *(Urine Microscopical)*

Total number examined	...	...	...	...	...	...	2,792
Hyaline casts	...	...	...	...	...	...	220
Granular casts	...	...	...	...	...	...	172
Waxy casts	...	...	...	...	...	...	30
Cellular casts...	...	...	...	...	...	...	30
Leucocytic casts	...	...	...	...	...	...	25
Red blood cells casts	...	...	...	...	...	...	8
<i>Schistosomum haematobium</i>	...	...	...	...	...	...	294
<i>Trichomonas vaginalis</i>	...	...	...	...	...	...	83
Microfilaria	...	...	...	...	...	...	3

(b) *Faeces. (Microscopical)*

Total number examined	...	...	...	...	...	...	1,580
Helminths :—							
Trichuris ova	...	...	...	...	...	...	615
Ascaris ova	...	...	...	...	...	...	398
"Hookworm" ova	...	...	...	...	...	...	662
<i>Taenia saginala</i>	...	...	...	...	...	...	1
<i>Euterobius vermicularis</i>	...	...	...	...	...	...	2
<i>Strongyloides</i> larvae	...	...	...	...	...	...	91
Protozoa :—							
<i>Entamoebae histolytica</i>	...	...	...	...	...	...	66
<i>Entamoebae coli</i>	...	...	...	...	...	...	105
Vegetative amoebae...	...	...	...	...	...	...	36
<i>Dientamoebae fragilis</i>	...	...	...	...	...	...	1
<i>Giardia intestinalis</i>	...	...	...	...	...	...	64
<i>Chilomastix mesnili</i>	...	...	...	...	...	...	20
<i>Trichomonas intestinalis</i>	...	...	...	...	...	...	32
<i>Blastocystis hominis</i>	...	...	...	...	...	...	297

(c) *Urine. (Microscopical)*

Total number examined	...	...	...	...	...	...	982
Granular casts	...	...	...	...	...	...	80
Hyaline casts	...	...	...	...	...	...	81
Leucocytic casts	...	...	...	...	...	...	8
Red blood cells casts	...	...	...	...	...	...	9
Waxy casts	...	...	...	...	...	...	9
Cellular casts...	...	...	...	...	...	...	19
<i>Schistosomium haematobium</i> ova	...	...	...	...	...	...	70
<i>Trichomonas vaginalis</i>	...	...	...	...	...	...	63
Microfilariae	...	...	...	...	...	...	2

II. BACTERIOLOGY

727 MICROSCOPICAL EXAMINATIONS WERE MADE

(a) *Sputum (Microscopical)*

Total number examined	...	...	...	...	...	...	551
<i>Mycobacter tuberculosis</i>	...	...	...	...	...	...	82

(b) *Nasal and Throat Swabbings, (Microscopical)*

Total number examined	...	...	...	...	...	...	3
<i>Corynebact. diphtheriae</i>	...	...	...	...	...	...	2

(c) *Pus, Discharges and Scrapings (Microscopical)*

Total number examined	...	...	...	...	...	...	173
<i>Neisseria gonorrhoeae</i>	...	...	...	...	...	...	19

III. HAEMATOLOGY

Total number examined	...	...	...	...	...	...	1,109
Total counts of red and white cells and haemoglobin determinations	...	...	...	...	...	...	892
Differential counts	...	...	...	...	...	...	217

IV. BIOCHEMISTRY

Total number examined	...	...	...	...	...	...	262
Qualitative estimations of glucose	...	...	...	...	...	...	64
do, albumen	...	...	...	...	...	...	2
Qualitative tests for determination of acetone	...	...	...	...	...	...	55
do, do, bile	...	...	...	...	...	...	31

APPENDIX II

Report on the Mental Hospital for the year 1950

The total number of certified insane persons in the Colony on 31st December, 1950, was 1,095 compared with 1,069 on 31st December, 1949.

The distribution of the 1,095 certified insane persons on 31st December, 1950, was as follows:—

	Male	Female	Total
At Mental Hospital	339	262	601
On probation leave	263	182	445
On leave under G.N. 239/24	29	20	49
	—	—	—
TOTAL	631	464	1,095
	—	—	—

2. The insane rate per 10,000 of the population of the Island was 23.56, the estimated mid-year population in 1950 was 464,735.

3. The percentage sex distribution of the 1,095 certified insane persons was males 57.6, females 42.4.

HOSPITAL POPULATION

4. There were 622 persons in hospital (males 352, females 270) on 31st December, 1950, of these 13 males and 8 females were under interim order detention pending a decision as to their mental state.

The daily average number resident was 675 compared with 682 in 1949.

The maximum number resident in hospital was 699.

5. Table showing Admissions, Discharges and Deaths during 1950:—

	Male	Female	Total	Male	Female	Total
In hospital on 1st January, 1950	360	263	623	360	263	623
Cases admitted :—						
Back from New Year leave						
G.N. 239/24	23	31	54			
1st Admissions	149	109	258			
2nd—5th Admissions	39	15	54			
Readmitted from probation leave	72	49	121			
Cases admitted during 1950	283	204	487	283	204	487
	—	—	—	—	—	—
Total cases under care	—	—	—	—	—	1,110
Cases discharged :—						
Recovered during 1950	79	40	119			
Discharged by Central Board						
during 1950 (relieved)	166	124	290			
On leave under G.N. 239/24 on						
31st December 1950	40	11	51			
Died during 1950	15	13	28			
Total cases discharged and died	300	188	488	300	188	488
Remaining in hospital on						
31st December, 1950	—	—	—	—	—	622

The percentage of discharges to admissions was 94 compared with 88 in 1949. During the year, 112 patients on probation leave were found cured and finally discharged. During 1950, the number of persons who required certification was 174 (males 100, females 74) compared with 168 (males 91, females 77) in 1949.

CAUSES OF INSANITY

6. As usual heredity, alcohol, mental stress, epilepsy were prominent etiological factors.

DEATHS

7. During the year there were 28 deaths (males 15, females 13) compared with 34 (males 20, females 14) in 1949.

The death rate calculated on the daily average number of resident patients was 4.74 per cent compared with 7.06 per cent in 1947, 5.18 per cent in 1948 and 4.99 per cent in 1949.

INFECTIVE AND ALLIED DISEASES

8. During the year there were 31 cases of dysentery, one of which was amoebic, 2 bacillary and 28 ill-defined. Malaria cases numbered 8 and influenza accounted for 39 cases. There was only one case of typhoid fever. Preventive inoculation of all the patients with T.A.B. is still carried out.

AVITAMINOSIS AND DISEASES OF NUTRITION

9. 21 cases of pellagra were recorded during the year and 4 cases of other avitaminosis (ariboflavinosis and Vitamin B, deficiency).

VIOLENCE AND ESCAPE

10. There were no cases of suicide or homicide. Six patients absconded from the hospital, but were recaptured, and brought back to the hospital.

Cases of injury to patients were as follows:—

Self inflicted...	...	...	...	3
Inflicted by other patients	...	...	...	37
Inflicted by attendants	...	...	...	Nil

Members of the staff were injured by patients on 39 occasions, but the injuries were not of a serious nature.

SECLUSION AND RESTRAINT

11.—(a) Mechanical restraint by strait jacket for destructive habits of patients: 6 patients (4 males and 2 females) were so restrained.

(b) Seclusion to meet conditions of violent behaviour: 4 patients.

The greatest duration in any single instance, for restraint and seclusion was 4 hours.

TREATMENT (PHYSICAL METHODS)

12. During the year, 21 schizophrenias had insulin shock therapy with an average of 20 comas per patient. 52 per cent made a good recovery, 28 per cent were improved and 20 per cent showed no improvement. 264 indoor patients were treated by electroplexy with an average of 10 shocks per patient.

The results are tabulated as follows :—

Disorders of the affective type :	215 treated, 117 with good result, 32 with fair result. 66 no improvement.
Schizophrenias :	49 treated, 21 with good result. 10 with fair result. 18 with no result.

Ten patients suffering from mania depression insanity who had failed to improve with electroplexy had prolonged narcosis, the duration of the narcosis was 12 days. Four patients had a very good social remission and were able to leave the hospital but the other six showed no improvement.

During the year, 54 out-door patients also attended the hospital for electro-convulsive therapy with a total of 344 attendances. 68 per cent made a good recovery and 18 per cent were much improved and thus avoided commitment to the hospital. 14 per cent showed no improvement. 19 chronic schizophrenias, needing maintenance treatment in order to keep them out of the Institution, also attended the out-patient clinic.

OCCUPATIONAL TREATMENT

13. The usual high percentage of inmates employed was well maintained and work of great economic value was accomplished. Over 38 per cent of inmates were in regular employment during the year. All the laundry work of the hospital was done by the female patients, and this together with gardening, ward work, darning, mattress making, carpentry and the manufacture of the hospital tinware gave employment daily to an average of 160 male and 95 female patients. The occupational therapy class under the direction of the therapists, Misses Harel and Scott, is held twice weekly and is attended by an average of 25 patients. A sale of works held in October realised a net profit of Rs. 200.

RECREATION

14. Both in-door and out-door amusements were well provided throughout the year, as well as a very successful *fête* attended by many distinguished visitors was held on the 22nd December at which patients and the hospital staff took part in various sporting events. A cinema performance is now held once monthly. An average of 25 patients enjoy a day at the seaside once weekly.

ACCOMMODATION

15. A male ward of 40 beds was completed. Another male ward together with a female admission ward and female infirmary are to be built this year. Dunlopillo mattresses are now being supplied to the hospital.

VISITS

16. Dr. Pridie, the Medical Adviser to the Colonial Office, visited and inspected the hospital on the 14th January, 1950. The Honourable Mrs. Rochecouste, an elected member of the Legislative Council, inspected the hospital on the 6th November, 1950.

The Central Board of Commissioners of Mental Diseases held 12 monthly meetings. A Board of Survey was held on 1st December, 1950.

RELIGIOUS SERVICES

17. During the year, mass was said every month and an average of 40 patients attended each service. The civil chaplain of the Church of England also held services.

STAFF

18. Dr. Vellin was appointed additional Medical Officer on 13th December, 1950.

An additional Gate Keeper was appointed on 1st November, 1950.

Miss White, the Matron, returned from European leave on 1st March, 1950.

Mr. Arouff the Head Attendant retired on pension on 3rd November, 1950.

Dresser Dhuny proceeded on European leave on 10th April, 1950.

Three additional female attendants were appointed, two on 1st July, 1950 and one on 1st August, 1950.

ACKNOWLEDGEMENT

19. In conclusion I would like to thank the Director of Medical Services and the members of the Central Board for their assistance in the management of the hospital, and my thanks are also due to the members of the hospital staff for their co-operation and help.

L. N. R. COMTY,
Medical Superintendent,
Mental Hospital.

APPENDIX III

Report on the Work of the Division of Entomology for 1950

INTRODUCTION

This report deals largely with the mosquito-survey of dwellings, after the application of residual insecticides. D.D.T. was used, experimentally for the first time, in a few huts in Médine sugar estate camp, in 1945(1). As the experiment showed that dwellings which had sheltered over a thousand anophelines became free after spraying, and remained so for several months, another experiment, on a larger scale, was made in the Bambous—Médine Flic-en-Flacq area (2). This was started in 1946, with a survey of the human population, for spleen and parasitic rates, and a survey of the mosquito population in order to ascertain the number in the dwellings, their habits and the infectivity rate. A spraying with D.D.T. then followed, when 1,240 build-

ings were treated. The mosquito census, which started a week after, showed that dwellings which had harboured thousands of anophelines, before spraying, now contained none. Three months after, two *A. funestus* were found at Flic-en-Flac. The whole region was re-sprayed, and the anophelines disappeared. Such encouraging results led to the start of another experiment on a much larger scale, in the south-eastern part of Grand Port district, on the 7th of May, 1947. Two months after the application of D.D.T. a survey showed that no anophelines could be found at Savannah, La Sourdine, Virginin and Union Vale, whilst 3,979 had been found, during one survey, before spraying. Even ten months after the first application of D.D.T., *A. funestus* could not be found in the area.

These results were so good that an extension of the campaign was contemplated. It was accordingly decided to seek the co-operation of the Colonial Insecticides Committee in an attempt to eradicate malaria by means of an island-wide insecticide campaign. When this had been decided, the census of the mosquito population was extended to cover as much of the island as possible, before the advent of the Malaria Eradication Scheme's campaign, in the early days of 1949. The results of surveys tabulated in this 1950 report refer, therefore, chiefly to findings made after the application of residual sprays.

MOSQUITO SURVEYS

After the treatment of dwellings, searches for mosquito continued in the houses which had shown a great number of insects before spraying. In each region, adults were looked for in the same blocks that had been searched in previous years, so that results could be compared. The routine consisted in day knock-downs by means of pyrethrum sprays. To be certain that no anophelines were being missed, especially *A. gambiae*, night knock-downs were also made during the height of the *gambiae* season.

In all 13,867 rooms were searched and 33,661 mosquitoes were collected and examined.

Details are given in the tables which follow.

All the houses in the district of Pamplémousses and Rivière du Rempart had been first treated with Gamexane ; but as, a year after, anophelines still continued to be found in numbers, in many houses, Gammexane was replaced by D.D.T. The catches made just before the replacement of Gammexane by D.D.T. are recorded in Table A together with those made at Wolmar, where Gammexane was also being experimented with before the use of D.D.T.

TABLE A

DISTRICT CENSUS OF THE ADULT MOSQUITO POPULATION MADE CHIEFLY IN THE DWELLINGS OF THE COASTAL BELT AFTER GAMEXANE TREATMENT—LAST APPLICATION BETWEEN 30TH AUGUST AND 19TH SEPTEMBER

Date		Locality			No. of dwellings searched	No. of rooms in the dwellings	No. of adult mosquitos found					
							A. funes- tus		A. gam- biae		C. fali- gans	
							♀	♂	♀	♂		
PAMPLEMOUSSES—RIVIÈRE DU												
REMPART												
Day knock-down												
Jan.	4th	...	Haute-Rive	...	...	4	7	198	10	—	—	738
"	4th	...	Hermitage	...	...	8	14	4	—	—	—	732
"	5th	...	Ile d'Ambre Est.	..	...	4	16	—	—	2	—	690
"	6th	...	Pointe-des-Lascars	...	...	25	50	49	—	—	—	2,026
"	9th	...	Poudre-d'Or ..	...	...	32	72	—	—	—	—	1,454
"	10th	...	Grand-Gaube	...	...	32	80	—	—	4	1	84
"	11th	...	Melville	...	...	33	68	—	—	—	—	111
"	12th	...	Roches-Noires	...	...	16	62	—	—	—	—	32
"	12th	...	Petit-Gamin	...	...	27	62	—	—	—	—	159
"	12th	...	Ville-Valio	...	...	3	8	—	—	—	—	95
BLACK RIVER												
Jan.	7th	...	Wohlar	...	..	11	30	124	4	6	1	70
Feb.	11th	...	"	...	...	11	30	42	2	15	2	77
Feb.	25th	..	"	...	...	12	31	81	12	16	2	80
May	11th	...	"	...	...	3	7	116	—	41	1	191
June	21st	...	"	...	...	12	28	28	—	28	—	47

Table B shows the results obtained after the application of D.D.T.—

TABLE B.

DISTRICT CENSUS OF THE ADULT MOSQUITO POPULATION MADE CHIEFLY IN THE DWELLINGS OF THE COASTAL BELT AFTER THE APPLICATION OF D.D.T.

Date		Locality				No. of dwellings searched	No. of rooms in the dwellings	No. of adult mosquitoes found				
								A. funes- lus		A. gam- bie		
PAMPLEMOUSSES—RIVIÈRE DU								♀	♂	♀	♂	
REMPART												
								Day knock-downs				
Feb.	1st	...	Haute-Rive	...	...	5	14	—	—	—	—	47
"	1st	...	Hermitage	...	...	11	19	—	—	—	—	25
"	1st	...	Ile d'Ambre Est	...	...	5	17	—	—	—	—	29
"	2nd	...	Pointe-des-Lascars	...	...	22	49	—	—	—	—	14
"	3rd	...	Melville	...	...	33	65	—	—	—	—	19
"	4th	...	Cap Malheureux	...	...	17	31	—	—	—	—	1
"	6th	...	Gde. Pointe-aux-Piments	...	...	32	64	—	—	—	—	47
"	7th	...	Trou-aux-Biches	...	...	32	87	—	—	—	—	51
Feb.	8th	...	Petit-Gamin	...	...	23	53	—	—	—	—	259
"	8th	...	Ville-Valio	...	...	2	6	—	—	—	—	17
"	9th	...	Tombeau-Bridge	...	...	33	77	—	—	—	—	67
"	10th	...	Poudre-d'Or	...	...	33	70	—	—	—	—	32
"	13th	...	Haute-Rive	...	...	4	9	—	—	—	—	65
"	13th	...	Hermitage	...	...	10	18	—	—	—	—	6
"	13th	...	Ile d'Ambre Est.	...	...	5	17	—	—	—	—	5
"	14th	...	Pte. des Lascars	...	...	30	56	—	—	—	—	24
"	27th	...	Melville	...	...	33	66	—	—	—	—	73
"	28th	...	Cap Malheureux	...	...	33	65	—	—	—	—	59

TABLE B—continued

Date	Locality					No. of dwell-ings search- ed	No. of rooms in the dwell-ings	No. of adults mosquitos found					
								<i>A. funestus</i>		<i>A. gambiae</i>		<i>C. fali- gans</i>	
								♀	♂	♀	♂		
PAMPLEMOUSSES—RIVIÈRE DU REMPART													
							Night Knock-downs						
March	6th	...	Ile d'Ambre	...	...	5	19	—	—	—	—	—	19
"	6th	...	Hermitage	...	...	7	12	—	—	—	—	—	21
"	6th	...	Haute-Rive	...	...	3	6	27	—	—	—	—	39
"	7th	...	Pte. Lascars	...	...	18	36	—	—	1	—	—	43
"	9th	...	Petit Gamin	...	...	21	48	—	—	1	1	—	33
"	10th	...	Tombeau Bridge	...	...	21	47	—	—	18	1	—	54
"	30th	...	Petit-Gamin	...	...	20	44	—	—	43	—	—	227
April	6th	...	Ile d'Ambre	...	...	5	19	1	—	12	—	—	106
"	6th	...	Hermitage	...	...	8	13	—	—	35	1	—	109
"	6th	...	Haute-Rive	...	...	2	4	3	—	44	—	—	194
"	11th	...	Pte. Lascars	...	...	14	25	—	—	14	—	—	211
"	13th	...	Petit Gamin	...	...	21	46	—	—	16	1	—	246
"	19th	...	Pavillon and Cap Malheureux	...	...	22	42	—	—	—	—	—	174
"	20th	...	Pavillon and Cap Malheureux	...	...	22	42	—	—	1	—	—	289
"	24th	...	Tombeau Bridge	...	...	21	45	—	—	32	1	—	84
"	27th	...	Trou-aux-Biches	...	...	21	63	—	—	3	—	—	272
May	2nd	...	Ile d'Ambre	...	...	5	19	—	—	7	—	—	109
"	2nd	...	Hermitage	...	...	7	13	1	—	16	—	—	304
"	2nd	...	Haute-Rive	...	...	4	6	2	—	4	—	—	78
"	3rd	...	Petit Gamin	...	...	21	40	—	—	3	—	—	242
"	4th	...	Pte. Lascars	...	...	22	37	—	—	78	—	—	312
"	5th	...	Pavé Cap Malheureux	...	...	23	42	—	—	5	—	—	267
"	8th	...	Pavé Cap Malheureux	...	...	22	44	—	—	6	—	—	186
"	9th	...	Trou-aux-Biches	...	...	22	66	—	—	2	—	—	144
"	10th	...	Tombeau Bridge	...	...	22	48	—	—	26	—	—	117
June	1st	...	Ile d'Ambre	...	...	5	20	—	—	4	—	—	16
"	1st	...	Hermitage	...	...	7	15	—	—	10	—	—	36
"	2nd	...	Pte. Lascars	...	...	22	40	1	—	11	—	—	129
June	1st	...	Haute-Rive	...	...	4	7	—	—	—	—	—	21
"	5th	...	Pavé	...	...	24	42	—	—	—	—	—	72
"	6th	...	Pavillon	...	...	22	44	—	—	—	—	—	60
"	7th	...	Trou-aux-Biches	...	...	21	59	—	—	—	—	—	71
"	8th	...	Petit Gamin	...	...	23	42	—	—	—	—	—	101
"	19th	...	Tombeau Bridge	...	...	21	46	—	—	—	—	—	46
Day knock-downs													
July	7th	...	Haute-Rive	...	...	5	12	1	—	—	—	—	60
"	7th	...	Hermitage	...	...	9	16	—	—	—	—	—	108
"	7th	...	Ile d'Ambre Est	...	...	4	17	—	—	—	—	—	18
"	10th	...	Pointe-des-Lascars	...	...	23	43	—	—	2	—	—	107
"	11th	...	Poudre d'Or	...	...	27	64	—	—	—	—	—	91
"	12th	...	Bois-d'Oiseaux	...	...	29	54	—	—	1	—	—	100
"	13th	...	Melville	...	...	21	45	—	—	5	—	—	45
"	14th	...	Cap Malheureux	...	...	76	178	—	—	—	—	—	141
"	19th	...		...	...								
"	20th	...	Grand' Baie	...	...	21	41	—	—	—	—	—	19
"	21st	...	Trou-aux-Biches	...	...	21	58	—	—	—	—	—	23
"	22nd	...	Petit Gamin	...	...	15	27	—	—	—	—	—	37
"	24th	...	Tombeau-Bridge	...	...	22	49	—	—	—	—	—	76
"	25th	...	Haute-Rive	...	...	4	7	—	—	—	—	—	79
"	25th	...	Hermitage	...	...	11	19	—	—	—	—	—	45
"	31st	...	Pointe-des-Lascars	...	...	27	53	—	—	—	—	—	94
Aug.	1st	...	Haute-Rive	...	...	4	7	1	—	—	—	—	8
"	1st	...	Hermitage	...	...	9	15	—	—	—	—	—	26
"	1st	...	Ile d'Ambre Est.	...	...	5	20	—	—	—	—	—	29
"	11th	...	Haute-Rive	...	...	4	5	2	—	—	—	—	29
"	11th	...	Hermitage	...	...	6	10	—	—	—	—	—	7
"	11th	...	Ile d'Ambre Est.	...	...	5	21	—	—	—	—	—	25

TABLE B—continued

Date			Locality			No. of dwell-ings searched	No. of rooms in the dwell-ings	No. of adults mosquitos found					
								A. funestus		A. gambiae			C. fati-gons
								♀	♂	♀	♂		
Aug	14th	...	Pte-des-Lascars	...	...	26	48	—	—	—	—	17	
"	16th	...	Poudre d'Or	...	...	31	72	—	—	—	—	45	
"	17th	...	Cap Malheureux	...	...	61	147	1	—	—	—	103	
"	18th	...											
"	21st	...	Petit-Gamin	...	...	25	55	—	—	—	—	30	
"	21st	...	Ville-Valio	...	...	3	7	—	—	—	—	6	
"	22nd	...	Tombeau-Bridge	...	...	33	76	—	—	—	—	43	
Sept.	12th	...	Haute-Rive	...	...	5	9	—	—	—	—	41	
"	12th	...	Hermitage	...	...	10	18	—	—	—	—	23	
"	12th	...	Ile d'Ambre Est.	...	...	5	21	—	—	—	—	3	
"	13th	...	Pte-des-Lascars	...	...	30	59	—	—	—	—	64	
"	14th	...	Poudre-d'Or	...	...	30	63	—	—	—	—	62	
"	15th	...	Melleville	...	...	33	66	—	—	—	—	159	
"	18th	...	Cap Malheureux	...	...	40	98	—	—	—	—	50	
"	20th	...	Petit-Gamin	...	...	18	33	—	—	—	—	36	
"	20th	...	Ville-Valio	...	...	4	9	—	—	—	—	18	
"	21st	...	Tombeau-Bridge	...	...	22	48	—	—	—	—	58	
Oct.	2nd	...	Trou-aux-Biches	...	...	26	71	—	—	—	—	28	
"	11th	...	Haute-Rive	...	...	1	2	—	—	—	—	41	
"	11th	...	Hermitage	...	...	8	15	—	—	—	—	61	
"	11th	...	Ile d'Ambre Est.	...	...	6	19	—	—	—	—	122	
"	12th	...	Pte-des-Lascars	...	...	22	46	—	—	—	—	309	
"	13th	...	Poudre-d'Or	...	...	20	47	—	—	—	—	324	
"	16th	...	Melleville	...	...	22	45	—	—	1	1	56	
"	17th	...	Cap Malheureux	...	...	20	62	—	—	—	—	57	
"	18th	...	Tombeau-Bridge	...	...	8	17	—	—	—	—	26	
"	19th	...	Cap Malheureux	...	...	19	42	—	—	—	—	7	
"	20th	...	Petit-Gamin	...	...	8	24	—	—	—	—	32	
"	20th	...	Ville-Valio	...	...	3	7	—	—	—	—	23	
Nov.	10th	...	Haute-Rive	...	...	1	2	—	—	—	—	39	
"	10th	...	Hermitage	...	...	10	17	—	—	—	—	73	
"	10th	...	Ile d'Ambre Est.	...	...	6	22	—	—	—	—	12	
"	13th	...	Pte-des-Lascars	...	...	22	46	—	—	—	—	125	
"	14th	...	Poudre d'Or	...	...	22	27	—	—	—	—	241	
"	15th	...	Melleville	...	...	11	21	—	—	—	—	62	
"	16th	...	Cap Malheureux	...	...	33	76	—	—	—	—	124	
"	20th	...	Petit-Gamin	...	...	17	39	—	—	—	—	162	
"	29th	...	Peyrebère	...	...	43	93	—	—	—	—	64	
"	30th	...											
"	30th	...	Grand' Baie	...	...	11	25	—	—	—	—	3	
Day Knock-downs													
Dec.	1st	...	Melville	...	...	33	67	—	—	—	—	60	
"	2nd	...	Petit-Gamin	...	...	13	27	—	—	—	—	147	
"	2nd	...	Ville-Valio	...	...	3	7	—	—	—	—	26	
"	4th	...	Poudre-d'Or	...	...	30	63	—	—	—	—	320	
"	11th	...	Tombeau-Bridge	...	...	33	73	—	—	—	—	215	
"	22nd	...	Haute-Rive	...	...	7	16	—	—	—	—	189	
"	22nd	...	Hermitage	...	...	11	22	—	—	—	—	102	
"	22nd	...	Ile d'Ambre Est	...	...	5	22	—	—	—	—	60	
"	28th	...	Pointe-des-Lascars	...	...	22	44	—	—	—	—	179	
"	29th	...	Poudre-d'Or	...	...	22	50	—	—	—	—	149	
Night knock-downs													
Mch.	1st	...	Pont-Blanc	...	...	22	41	—	—	1	—	96	
April	12th	...	Pont-Blanc	...	...	22	42	—	—	10	—	245	
"	14th	...	Belle-Rose	...	...	20	36	—	—	—	—	201	
"	28th	...	Pont-Blanc	...	...	23	45	—	—	23	1	158	
May	31st	...	Pont-Blanc	...	...	22	43	—	—	—	—	46	

TABLE B---continued

Date		Locality			No. of dwell-ings searched	No. of rooms in the dwell-ings	No. of adults mosquitos found					
							A. funestus		A. gambiae		C. fatigans	
							♀	♂	♀	♂		
Day knock-downs												
June	11th	...	Poste-à-Fayette	...	...	9	23	—	—	—	—	12
July	6th	...	Pont-Blanc	...	...	27	48	—	—	—	—	54
Aug.	10th	...	Pont-Blanc	...	...	31	51	—	—	—	—	20
Sept.	7th	...	Palmar	...	...	33	65	—	—	—	—	73
"	8th	...	Pont-Blanc	...	...	29	50	—	—	—	—	53
Oct.	9th	...	Palmar	...	...	20	37	—	—	—	—	41
"	10th	...	Pont-Blanc	...	...	8	16	—	—	—	—	9
"	11th	...	Pont-Blanc	...	...	8	19	—	—	—	—	10
Nov.	8th	...	Palmar	...	...	21	42	—	—	—	—	6
"	9th	...	Pont Blanc	...	...	18	34	—	—	—	—	10
Déc.	20th	...	Palmar	...	...	33	67	—	—	—	—	—
"	21st	...	Pont-Blanc	...	...	32	60	—	—	—	—	14
GRAND PORT												
Day knock-downs												
Jan.	16th	...	Carreau Esnouf	...	...	31	64	—	—	—	—	82
"	17th	...	Anse Jonchée	...	...	27	72	—	—	—	—	46
"	18th	...	Le Vallon	...	...	29	82	—	—	—	—	71
"	19th	...	Camp Raffia	...	...	4	14	—	—	—	—	6
"	19th	...	Rivière-des-Créoles	...	...	28	60	—	—	—	—	44
"	20th	...	La Sourdine	...	...	33	72	—	—	—	—	17
"	23rd	...	Mon-Désert	...	...	30	75	—	—	—	—	96
"	24th	...	Virginia	...	...	19	46	—	—	—	—	44
Feb.	15th	...	Anse Jonchée	...	...	29	75	—	—	—	—	142
"	16th	...	Ferney	...	...	13	58	—	—	—	—	104
"	17th	...	Carreau Esnouf	...	...	31	57	—	—	—	—	81
Night knock-downs												
Mar.	15th	...	Carreau Esnouf	...	...	22	42	—	—	37	1	72
"	16th	...	Union-Vale	...	...	10	49	—	—	5	—	55
"	17th	...	Plaine Magnien	...	...	21	50	—	—	—	—	119
"	20th	...	Pointe d'Esny	...	...	18	49	—	—	—	—	255
"	31st	...	Anse Jonchée	...	...	22	53	—	—	—	—	248
April	25th	...	Carreau Esnouf	...	...	23	45	—	—	64	2	136
"	26th	...	Anse Jonchée	...	...	22	47	—	—	—	—	320
May	29th	...	Carreau Esnouf	...	...	24	47	—	—	67	—	123
"	30th	...	Anse Jonchée	...	...	23	53	—	—	1	—	57
GRAND PORT												
Day knock-downs												
July	3rd	...	Carreau Esnouf	...	...	28	56	—	—	—	—	18
"	4th	...	Carreau Esnouf	...	...	11	—	—	—	—	—	—
						cow-sheds	—	—	—	—	—	—
"	4th-5th	...	Anse Jonchée	...	...	27	63	—	—	—	—	95
July	5th	...	Bambous Virieux	...	...	17	32	—	—	—	—	23
Aug.	8th	...	Carreau Esnouf	...	...	32	63	—	—	—	—	27
"	9th	...	Anse Jonchée	...	...	25	56	—	—	—	—	15
Sept.	4th	...	Carreau Esnouf	...	...	30	55	—	—	—	—	41
"	5th	...	Rivière des Créoles	...	...	30	60	—	—	—	—	71
"	6th	...	Anse Jonchée	...	...	26	59	—	—	—	—	43
Oct.	4th	...	Carreau Esnouf	...	...	32	63	—	—	—	—	140
"	5th	...	Rivière des Créoles	...	...	32	64	—	—	—	—	88
"	6th	...	Anse Jonchée	...	...	16	34	—	—	—	—	36
Nov.	3rd	...	Carreau Esnouf	...	...	22	45	—	—	—	—	60
"	6th	...	Rivière des Créoles	...	...	21	50	—	—	—	—	12
"	7th	...	Anse Jonchée	...	...	22	49	—	—	—	—	25
Dec.	15th	...	Carreau Esnouf	...	...	33	59	—	—	—	—	20
"	18th	...	Rivière des Créoles	...	...	33	71	—	—	—	—	29
"	19th	...	Anse Jonchée	...	...	33	71	—	—	—	—	17

TABLE B—continued

Date		Locality			No. of dwell-ings searched	No. of rooms in the dwell-ings	No. of adults mosquitos found				C. fatigans
							A. funestus		A. gambiae		
							♀	♂	♀	♂	
BLACK RIVER											
Day knock-downs											
Jan.	21st	...	Camp Benoit	...	...	18	38	—	—	—	52
"	25th	...	Grande Rivière Noire	...	...	33	77	2	—	3	423
"	27th	...	Beau Songes	...	...	32	67	—	—	—	154
"	28th	...	Pierrefonds	...	...	12	36	—	—	—	54
"	30th	...	Tamarin Est.	...	...	22	47	—	—	—	400
"	31st	...	Les Salines	...	...	27	56	4	—	3	276
Feb.	18th	...	Morne-Brabant	...	...	21	44	—	—	1	76
"	20th	...	Morne Brabant	...	...	32	39	—	—	—	67
"	21st	...	Coteau Raffin	...	...	28	59	—	—	—	404
"	22nd	...	La Gaulette	...	...	31	70	—	—	—	350
"	23rd	...	Case Noyale	...	...	32	75	—	—	—	226
"	24th	...	Pelite Case Noyale	...	..	32	71	—	—	—	224
Night knock-downs											
Mar.	13th	...	Camp Créoles Albion	...	...	20	40	—	—	3	34
"	14th	...	Grande Rivière Noire	...	...	20	43	—	—	1	43
"	21st	...	Flic-en-Flac	...	...	19	49	—	—	5	15
"	22nd	...	Camp-Gallet	...	...	14	55	—	—	—	85
"	23rd	...	Gauthier	...	...	18	40	19	—	37	82
"	24th	...	Baie-du-Tamarin	...	...	22	51	—	—	9	75
"	27th	...	Bambous	...	...	22	42	—	—	4	69
April	3rd	...	Anna (La Retraite)	...	...	20	66	—	—	—	59
"	4th	...	Belle Isle	...	...	8	22	—	—	1	23
"	4th	...	Camp Lallah (Médine)	...	...	10	19	—	—	1	65
"	5th	...	Clarence	...	...	17	45	6	1	20	83
"	17th	...	Gros Cailloux	...	...	19	47	—	—	4	212
"	18th	...	Camp Créoles Albion	...	...	23	44	—	—	—	64
"	21st	...	Grande Rivière Noire	...	...	22	46	—	—	4	192
May	11th	...	Camp Créoles Albion	...	...	22	43	—	—	2	105
Night knock-downs											
May	12th	...	Canot...	...	...	22	43	—	—	—	103
"	15th	...	Mon Repos	...	...	8	17	—	—	—	36
"	15th	...	Bambous	...	...	14	32	—	—	—	80
"	16th	...	Belle-Isle	...	...	8	21	—	—	2	46
"	16th	...	Camp Lalah	...	...	10	20	—	—	8	94
"	17th	...	Camp Galets (Médine)	...	...	14	57	—	—	12	225
"	18th	...	Anna (La Retraite)	...	...	20	60	—	—	—	83
"	19th	...	Clarence	...	...	16	44	—	—	—	96
"	22nd	...	Gauthier	...	...	18	42	—	—	4	75
"	23rd	...	Baie-du-Tombeau	...	...	22	45	—	—	—	16
"	25th	...	Grande Rivière Noire	...	...	21	46	—	—	2	73
"	26th	...	Flic-en-Flac	...	...	21	56	—	—	2	53
June	13th	...	Camp Créoles (Albion)	...	...	23	44	—	—	—	15
"	14th	...	Belle-Isle	...	...	8	21	—	—	—	14
"	14th	...	Camp Lalah (Médine)	...	...	10	20	—	—	1	18
"	15th	...	Camp Galets	...	...	14	57	—	—	—	27
"	16th	...	Anna Est	...	...	20	55	—	—	—	31
"	19th	...	Flic-en-Flac	...	...	20	54	—	—	1	43
"	20th	...	Clarence	...	...	15	41	—	—	—	17
"	22nd	...	Gauthier	...	...	18	40	—	—	1	18
"	23rd	...	Baie du Tamarin	...	...	22	45	—	—	—	28
"	26th	...	Grande Rivière Noire	...	...	22	47	—	—	1	18
"	27th	...	Petite Rivière Noire...	...	...	42	89	—	—	4	253
"	28th	...		...	...						
"	29th	...	Tamarin Est.	...	...	44	98	—	—	2	138
"	30th	...		...	...						

TABLE B—continued

Date		Locality			No. of dwell-ings search- ed	No. of rooms in the dwell-ings	No. of adults mosquitos found					C. fati- gans
							A. funestus		A. gambiae			
							♀	♂	♀	♂		
Day knock-downs												
July	8th	...	Wolmar	...	...	9	26	—	—	—	—	4
"	27th	...	Camp-Créoles-Albion	...	...	22	46	—	—	—	—	49
"	28th	...	Canot	...	...	11	24	—	—	—	—	37
"	28th	...	Gros Cailloux	...	...	11	25	—	—	1	—	15
"	29th	...	Wolmar	...	...	12	31	—	—	—	—	35
Aug.	2nd	...	Gauthier	...	...	19	41	—	—	—	—	40
"	2nd	...	Baie du Tombeau	...	...	10	23	—	—	—	—	15
"	3rd	...	Grande Rivière Noire	...	...	30	62	—	—	1	—	35
"	4th	...	Petite Rivière Noire...	...	...	8	15	—	—	—	—	25
"	4th	...	Case Noyale...	...	...	24	54	—	—	1	—	47
"	5th	...	Wolmar	...	...	4	10	—	—	—	—	9
"	7th	...	Les Salines	...	...	28	62	—	—	—	—	22
"	12th	...	Flic-en-Flac	...	...	18	47	—	—	—	—	21
"	23rd	...	Camp-Créoles-Albion	...	...	33	75	—	—	—	—	52
"	24th	...	Canot	...	...	30	57	—	—	2	3	68
"	26th	...	Flic-en-Flac	...	...	20	54	—	—	—	—	25
"	28th	...	Gauthier	...	...	19	38	—	—	1	—	29
"	29th	...	Petite Rivière Noire	...	...	27	55	—	—	—	—	161
"	30th	...	Grande Rivière Noire	...	...	32	66	—	—	—	—	56
"	31st	...	Clarence	...	...	12	34	—	—	—	—	33
"	31st	...	Camp La Boue	...	...	19	37	—	—	—	—	15
Sept.	1st	...	Case Noyale	...	...	32	72	—	—	—	—	76
"	2nd	...	Wolmar	...	...	11	27	1	—	3	1	20
"	11th	...	Flic-en-Flac	...	...	15	33	—	—	—	—	9
"	11th	...	Anna Estate	...	...	6	18	—	—	—	—	—
Day knock-downs												
Sept.	16th	...	Wolmar	...	...	11	26	1	—	7	—	16
"	22nd	...	Camp Créoles Albion	...	...	22	44	—	—	4	2	21
"	23rd	...	Wolmar	...	...	10	27	2	—	2	—	25
"	25th	...	Canot	...	...	13	26	—	—	—	—	18
"	25th	...	Gros Cailloux	...	...	7	17	—	—	—	—	33
"	26th	...	Gauthier	...	...	7	15	—	—	—	—	10
"	26th	...	Baie du Tamarin	...	...	26	56	—	—	—	1	46
"	27th	...	Grande Rivière Noire	...	...	33	69	—	—	—	—	57
"	28th	...	Petite Rivière Noire	...	...	32	65	—	—	—	—	194
"	29th	...	Clarence	...	...	13	28	—	—	—	—	40
"	29th	...	Camp La Boue	...	...	19	34	—	—	—	—	15
Oct.	3rd	...	Case Noyale	...	...	31	68	—	—	—	—	187
"	14th	...	Wolmar	...	...	10	26	—	—	—	—	12
"	21st	...	Wolmar	...	...	8	22	—	—	—	1	15
"	23rd	...	Camp Créoles Albion	...	...	22	45	—	—	—	—	16
"	24th	...	Canot	...	...	11	24	—	—	—	—	4
"	24th	...	Gros Cailloux	...	...	11	27	—	—	—	—	6
"	25th	...	Gauthier	...	...	16	36	—	—	2	1	19
"	25th	...	Baie du Tamarin	...	...	5	14	—	—	—	—	7
"	26th	...	Black River	...	...	21	44	—	—	—	1	79
"	27th	...	Petite Rivière Noire...	...	...	22	46	—	—	—	—	370
"	28th	...	Wolmar	...	...	9	23	—	—	1	—	9
"	30th	...	Clarence	...	...	11	26	—	—	1	—	16
"	31st	...	Case Noyale	...	...	21	50	—	—	—	—	251
Nov.	4th	...	Wolmar	...	...	9	25	—	—	—	1	14
"	11th	...	Wolmar	...	...	10	23	—	—	2	4	15
"	22nd	...	Camp Créoles Albion	...	...	32	66	—	—	—	—	18
Dec.	5th	...	Camp Créoles Albion	...	...	33	66	—	—	—	—	7
"	6th	...	Gauthier	...	...	19	39	3	—	—	—	95
"	6th	...	Baie du Tamarin	...	...	13	33	—	—	—	—	4
"	7th	...	Petite Rivière Noire	...	...	33	68	—	—	—	—	96
"	8th	...	Grande Rivière Noire	...	...	33	73	—	—	—	—	62

TABLE B—continued

Date		Locality				No. of dwellings searched	No. of rooms in the dwellings	No. of adults mosquitos found					
								A. funestus		A. gambiae		C. fatigans	
								♀	♂	♀	♂		
Dec.	9th	...	Wolmar	...	...	...	10	28	—	—	—	—	5
"	12th	...	Case Noyale	...	...	...	33	77	—	—	—	—	190
"	13th	...	Chamarel	...	...	...	33	85	—	—	—	—	20
"	14th	...	Chamarel	...	...	...	33	66	—	—	—	—	32
"	27th	...	Gauthier	...	...	...	14	31	—	—	—	—	19
PORT LOUIS						Day knock-downs							
Dec.	30th	...	Port Louis	...	...	...	7	24	—	—	—	—	12
Moka						Night knock-downs							
Mar.	29th	...	Pailles	...	...	...	22	53	—	—	—	—	423
						Day knock-downs							
July	15th	...	Pailles	...	...	...	15	36	—	—	—	—	12
"	26th	...	Pailles	...	...	...	22	42	—	—	—	—	33
Aug.	19th	...	Pailles	...	...	...	17	43	—	—	—	—	25
Sept.	30th	...	Pailles	...	...	...	16	38	—	—	—	—	30
Nov.	18th	...	Beau Bois	...	...	...	8	31	2	—	—	—	40
"	21st	...	Beau Bois	...	...	...	12	45	4	—	—	—	99
"	21st	...	Ripailles	...	...	...	15	37	—	—	—	—	12
						Day knock-downs							
Nov.	23rd	...	Beau Bois	...	...	...	33	78	1	—	—	—	212
"	24th	...	Nouvelle Découverte	...	...	...	33	72	—	—	—	—	11
"	25th	...	Malinga	...	...	...	8	14	—	—	—	—	43
"		...	Crève-Coeur	...	...	...	11	22	—	—	—	—	57
"	27th	...	L'Avenir	...	...	...	33	87	—	—	—	—	111
"	28th	...	L'Avenir	...	...	...	22	60	—	—	—	—	51
"	28th	...	Beau-Bois	...	...	...	10	38	22	—	—	—	45
Dec.	16th	...	Beau-Bois	...	...	...	14	27	16	1	—	—	30
"	16th	...	Pailles	...	...	...	19	42	—	—	—	—	61
						Night knock-downs							
PLAINES WILHEMS													
Mar.	28th	...	Beau-Bassin, Crownland	...	...	...	17	60	—	—	—	—	1,013

ANOPHELINE INCIDENCE

A. Funestus

Adults. Pamplémousses and Rivière du Rempart districts were sprayed, for the first time, during the second half of January. Soon after, *A. funestus* ceased to be found. During the months of March to September, however, four females were found at Haute Rive, one at Cap Malheureux and another at Melville, during day-time catchings, and thirty-two at Haute Rive, one at Ile d'Ambre, one at Hermitage and another at Pointe-des-Lascars during night-catchings.

At Moka twenty-six were found in November and December, at Beau Bois. A survey was then made of the whole region lying within a triangle having, as base, the mountain-range between Nouvelle Découverte and Bois Chéri, and as apex St. Pierre. The results, which were negative, seem to indicate that the localized focus at Beau Bois might have been started by insects which came up through the pass, above Crève Coeur, when that village was treated with D.D.T. After spraying, *A. funstus* was no longer encountered at Beau Bois.

In the district of Black River, six were found at Grande Rivière Noire, four at Wolmar, twenty-two at Gauthier and seven at Clarence. Those findings were in untreated huts, some of them new ; others, closed at the time of spraying. After treatment, the searches became negative.

In the districts of Port Louis, Plaines Wilhems, Flacq, Grand Port and Savanne, no *A. funestus* were found during the year. The insect has, in fact, not been seen in these districts for nearly two years, now.

Larvae. From January to March larvae were found at Haute Rive ; and up to August, in the coastal belt of Black River, between Wolmar and Case Noyale. In all these places, the searches became negative after the re-spraying of habitations.

A. Gambiae

Adults. None were found in Plaines Wilhems and in Moka. Very few were encountered at Savanne and at Port Louis. In these districts of Grand Port, Flacq, Rivière du Rempart, Pamplémousses and Black River, many adults were found not only during the night, but also by day, as can be seen from the tables. At Pamplémousses, however, in the coastal zone, between Grand Gaube and Pointe aux Piments, only eighteen adults were found, during the height of the breeding season.

Larvae. As for adults, no larvae were found in Plaines Wilhems and Moka ; and very few in Savanne and Port Louis. Breeding was intense throughout the year, in the coastal belt, in the districts of Black River, Pamplémousses, Rivière du Rempart and Grand Port. In Pamplémousses, however, very few larvae were found in the zone mentioned above, between Grand Gaube and Pointe aux Piments, in which oiling was carried out. In Grand Port, no larvae were found between Mon Désert and Rivière des Créoles. In this zone, all the major breeding-places were done away with during the last war, and maintenance is extremely good.

A. Maculipalpis

Adults. None were found in houses during day-time knock-downs. At night, four adults were found in huts at Black River and none in the other districts.

Larvae. In Black River, larvae were found to be fairly common all along the coastal belt. They were met occasionally in Pamplémousses district. In the others, they were found once at Poudre d'Or ; once at Vieux Grand Port, twice at Petit Cap ; and were not seen in Port Louis, Plaines Wilhems, Moka and Flacq.

Accidental introduction of mosquitoes by air

In the plane which reached here on the 14th of March, 1950, a dead anopheline was found after disinfestation. It turned out to be a female *A. squamosus*. My colleague, Dr. F. Doucet, the parasitologist of the *Institut de Recherche Scientifique* of Tananarive, when informed of the fact, imparted it to Dr. R. Paulian, the *Directeur-adjoint*, who in turn reported the matter to Dr. Jeansotte, the Director of Medical and Sanitary Services, asking the latter

whether it would not be possible to have the planes desinsectized before the take-off from Arivonimamo and, later, from the Réunion aerodrome so as to reduce the risk of further introductions into Mauritius. This procedure has been adopted since.

References

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(b) Tonking, H. D., Gébert, S. "The use of D.D.T. Residual Sprays in the Control of Malaria over an area of 16 square miles in Mauritius. Colony of Mauritius, Pub. No. 40, 1947, Government Printer.

27th April, 1951.

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APPENDIX IV

Report on Nutrition Work for 1950

1. *Village Health Workers.* One of the Village Health Workers established in Mahebourg was transferred to Long Mountain to assist Mrs. H. André, and two others were transferred from Surinam Social Welfare Centre to Camp Diable Day Nursery.

The activities of the Village Health Workers were:—

(a) *Home Visiting.* During the year 5,211 families were visited. Home visiting is now highly appreciated by the inhabitants as they realize the necessity and importance of such visits. This gives them, particularly the expectant and nursing mothers, the opportunity of obtaining individual help and advice from the Village Health Workers.

Home visits afford the Village Health Workers the advantage of contracting the persons individually and thus become familiar with them and their needs.

(b) *Home treatment.* This has been of much help mostly to children and the aged.

(c) *Demonstrations.* Practical demonstrations on mothercraft, preparation of artificial feeding, care of babies and sewing babies' garments have proved most helpful.

Besides, the Village Health Workers have helped in the various activities of the different centres, namely: in distributing milk, weighing babies and recording weights, distributing medicine and in ante-natal clinic. They also helped the Medical Officers on consulting days at Long Mountain and Mahebourg Hospitals.

The Mobile Dispensary has been most welcome to the inhabitants of Surinam since August last, and the Village Health Worker has assisted the Medical Officer and the dresser and has attended to the patients.

In Mahebourg, the Village Health Worker has been twice a week in the Mobile Dispensary to the outskirts of Mahebourg. She spared no efforts in helping the dresser and the inhabitants.

In Long Mountain, the Village Health Worker also helped the Dispenser of the locality three times weekly.

Since October last, in Long Mountain and the neighbourhood, it has been possible to issue milk to some nursing mothers from funds provided by the Public Assistance Department.

In Surinam the sewing and cookery classes have been well appreciated. Unfortunately, the cookery classes did have to stop through the centre having moved to a new building and to lack of proper equipment ; but it is hoped to start this class in the course of 1951.

In Camp Diable, the Village Health Workers have, in addition to their work at the Nursery, started some house visiting, once a week, and their efforts in this direction have been appreciated.

The Village Health Workers both in Surinam and Camp Diable attended Souillac Hospital once a week for nearly four months to study dressing and other treatments likely to prove unuseful to them in their work.

Simple talks have been given to schoolchildren in Surinam and Mahebourg and to girls attending the sewing and cookery classes at Surinam Social Welfare centre.

In addition, where it was possible to do so, medicine was given to those who needed it ; poor and needful cases were recommended to Poor Law Officers ; babies were recommended to Child Welfare Centres for milk ; old age persons were recommended for pension and transport facilities were provided to patients requiring treatment in hospital.

Work in co-operation with other Government Departments and Village Councils has proved most helpful and valuable.

2. Camp Diable Day Nursery. Two Village Health Workers are attached to Camp Diable Day Nursery which started in February, and ten children were admitted thereto after examination by the G.M.O. Savanne.

As a rule, the G.M.O. Savanne attends to the children at Day Nursery at least once every fortnight.

The members of the Village Council and the public in general highly appreciate this new departure and the work that is being done at the Nursery.

His Excellency the Governor and Lady Blood, the Honourable the Colonial Secretary and Mrs. Harford, His Worship the Mayor of Port Louis, members of the Legislative Council and members of the public interested in social work, visited the Nursery during the period under review. All the visitors had a favourable impression of the atmosphere and the general conditions prevailing at the Institution.

The children are kept at the Nursery from early morning till about 3.00 p.m. and every thing tends to prove that they really enjoy their stay.

The cost of the Nursery per child per mensem is approximately:—

					Rs. c.
Food	...	...	...	...	9 10
Servant	...	—	...	...	2 50
Fuel	...	...	...	...	80
Sundries	...	...	...	...	50
TOTAL					12 90

The parents contribute R. 1 weekly towards the cost. As regards:—

(a) *Health.* General improvement. Children looking cheerful and enthusiastic.

(b) *Weight.* The children have been weighed every month. The average increase was 1.7 kg. for the year.

(c) *Cleanliness.* The children have got acquainted with the use of spoons, beds and have acquired regular habits.

Though the demand for a bigger accommodation is great, it is not possible to admit a greater number of children until such time as some other suitable building becomes available.

It is worth mentioning that the Nursery has been functioning for nearly eleven months and that this new departure has proved most satisfactory in every line.

3. *Milk Distribution Scheme.* The Milk Distribution Scheme started in April. As there was some prejudice against the use of skimmed powder milk, full cream milk has been supplied to all primary schools of the island, twenty gms. of milk powder and ten gms. of raw sugar being issued to each schoolchild for a milk drink of half a pint. This drink costs approximately 5.9 cents per child and provides the following food factors:—

				Calories	Protein gm	Calcium mg
20 grams milk powder	...	...	...	97	5.1	180
10 grams raw sugar	...	...	...	40	—	7.5
TOTAL				137	5.1	187.5

Schools were visited in company of Mr. Sevremont, Officer in charge of the Milk Distributing Scheme, and instruction and practical demonstrations were given to schoolteachers as to the proper preparation of the milk powder.

Visits were also made with a view to controlling and to helping in the preparation of the milk powder. Attention was also given to the care and maintenance of milk utensils and tea-towels.

All steps were taken to ensure that the milk powder issued was always of good quality and any complaint to that effect was closely examined.

4. *Institutional feeding*.—(a) Advice and practical help was given to Poor Law Institutions and one week was spent in daily visits to one in particular in order to demonstrate the correct preparation and cooking of food and to introduce more variety in the diet.

(b) A weekly menu was drawn for one of the Orphanages at the request of the manager of that institution.

(c) An experiment was carried out in one *crèche* to demonstrate the effect of a high protein supplement on malnourished infants. Results of this experiment is given at 5 (b).

(d) *Prisons*. As the prisoners showed some reluctance to have the yeast tablets, means were devised so that they may have the yeast in some other way. In this connection, food yeast at 3 gms. per head per diem is now incorporated in the pulses.

Periodic visits are made to the kitchens in order to check the diet and the quantities given.

5. *Food Trials*.—(a) *Food Yeast*. At the request of the Superintendent of Prisons who pointed out that the prisoners showed some unwillingness to have the yeast tablets, trials as to the incorporation of food yeast in bread were made at Beau Bassin Prisons. (Food Yeast from Jamaica).

This experiment showed that the incorporation of food yeast in bread demands careful and adequate supervision to be successful. Furthermore as the fortified bread was darker in colour than the ordinary one, the Superintendent of Prisons shared the view that this might create dissatisfaction on the part of the prisoners.

Food yeast at 3 gms. per head per diem is therefore being incorporated in the pulses and is undetectable. This method is much more advisable, easily done and quite acceptable to the prisoners.

(Local food yeast is being supplied to the Prisons since March 1950).

(b) *Cliftol*. A small experiment with "Cliftol" powder was conducted at Belle Rose *Crèche* on seven undernourished children selected by Dr. André, D.D.M.S., with a view to ascertaining its effects on malnutrition.

The experiment lasted nearly four months.

The quantities of Cliftol given were at the beginning of the experiment, 5 gms. for babies below 15 months and 10 gms. for those above one year (average 5 years). These were increased as the response from the nutritional view point was considered to be poor, although weight increase was satisfactory.

In the last month of the experiment, babies below one year received 15 gms. daily and the others 25 gms. daily. The optimum dosage has not been worked out satisfactorily owing to the short duration of the experiment.

While the experiment was in progress, four children of approximately the same age and weight as four other children under treatment served as control and were weighed regularly.

The increases in weights were as follows:—

					Kilos
Children under treatment	...	...	...	...	5.5
Control	...	...	...	...	4.0

All the children of the institution were weighed weekly with the following results:—

		Average increase in weight	
		<i>During period of treatment</i>	<i>After treatment for same period</i>
		<i>12/1 to 3/5 kilograms</i>	<i>4/5 to 26/8 kilograms</i>
Seven children who received cliftol	...	1 to 4	0.8
Thirteen children not receiving cliftol	...	1 to 0	1.3

The satisfactory increase in weight was not the only feature of the experiment. At its conclusion the children lost their more obvious sign of malnutrition. They were more alert, had lost their puffiness and had more or less the same appearance, energy and enthusiasm as the other children.

It must be pointed out that the experiment was conducted during the greater part of the summer months. It would appear that after the discontinuance of the treatment (from exhaustion of supplies) the undernourished children did not fare as well as the other children. (normal). Also, the greater increase in weight of the normal children during the second period is probably due to seasonal factors, which acted adversely on the undernourished group.

CONCLUSION

Cliftol powder administered to children suffering from gross malnutrition produced a satisfactory increase in weight and removed the signs of malnutrition.

The experiment ended too soon as it is apparent that the satisfactory increase in weight was not maintained at its high level once the powder was withdrawn.

It may be that badly nourished children should be kept on cliftol for some months after a satisfactory response has been obtained.

The report on this experiment has been drafted in consultation with Dr. H. André, D.D.M.S.

6. *Survey Work.* The simple questionnaire survey was carried out in schools in districts representing different living conditions ; fourteen schools in four different areas were chosen and the survey carried out in those schools with the help of the teachers.

The results so far analysed give information regarding food habits and the frequency of consumption of different foodstuffs in different areas.

SIGNS OF FOOD DEFICIENCY

About 1,300 children attending the schools selected for the nutrition survey were examined for signs of food deficiency. Evidence of this was generally found but particularly marked in the schools of Black River district and of Poudre d'Or Village.

It is hoped to issue yeast tablets to those schools early in 1951.

7. *Talks.* These have been given to mothers and girls at Surinam and Camp Diable Social Welfare Centres.

8. *Port Louis Crèche.* Some time after the setting up of the Day Nursery in Camp Diable by the Department, the Municipality of Port Louis followed suit. A *crèche* was created in Port Louis. Though not under the control of the Medical Department, the Assistant Nutrition Officer was asked by His Worship the Mayor of Port Louis to help in its organisation. This was readily done and the town is now endowed with a social necessity.

I wish to express my heartfelt thanks to the Civil Commissioner South and Mrs. Lovelace, to Mrs. H. André, to the G.M.O. Savanne and to the members of the Camp Diable Village Council for their help, interest and co-operation in the work and to the teachers who are giving so much help in carrying out the survey in schools.

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